

THE COPPICE PRIMARY SCHOOL NURSERY

APPLICATION FOR ADMISSION OF CHILD TO THE COPPICE NURSERY

Child's Surname First Name(s)

Date of birth Age Gender: Male/Female

Child's Home address

.....

..... Postcode

Home Tel No Mobile Tel No

Email.....

I apply for my child to be admitted to The Coppice Nursery in September(year)

Please tick preference for session

(All sessions are Monday-Friday inclusive)

☐

Every
Morning
8:30-11:30

☐

Every
Afternoon
12:30-3:30

☐

All
Day
8:45-2:45

Please give reason for preference

.....

Please give names and classes of any brothers and sisters attending the school at the present time.

.....

Has your child any special educational needs or medical conditions that we need to be aware of?

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Please return to:

Administrative Officer
The Coppice Primary School
Shawhurst Lane
Hollywood
Birmingham B47 5JN

SignedMr/Mrs/Miss/Ms.
(Parent/Guardian)

PLEASE PRINT NAME

Date