



**Address:** High Street, Harefield, Middlesex, UB9 6BT

**Tel:** 01895 462399

**Email:** office@harefieldinfant.com

**Web:** www.harefieldinfant.com

**Executive Head Teacher:** Mr A.Sunner

**Head of School:** Mr J.Downs

### **Nursery Admission Form**

Please complete this form and return it to the school office using the above details.

#### **Primary parent/carer's details**

Title:.....

First and middle name: .....

Last name: .....

Relationship to child: .....

Home address: .....

.....

Post code: .....

Contact number: .....

Email address: .....

#### **Secondary parent/carer's details**

Title:.....

First and middle name: .....

Last name: .....

Relationship to child: .....

Home address (if different to primary parent/carer): .....

.....

Post code (if different to primary parent/carer): .....

Contact number: .....

Email address: .....



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**Child's details**

First and middle name: .....

Last name: .....

Date of birth: .....

Gender (please circle): Male / Female

Any other relevant information including dietary and medical needs:-

.....  
.....  
.....

Is your child entitled to 30 hours Nursery childcare (please circle)? Yes / No

**Details of any siblings already at Harefield Infant school or Harefield Junior School**

**Sibling 1**

First and middle name: .....

Last name: .....

Date of birth: .....

**Sibling 2**

First and middle name: .....

Last name: .....

Date of birth: .....