

## London Colney Primary and Nursery School Alexander Road, London Colney Hertfordshire AL2 1JG

01727 823283 www.londoncolney.herts.sch.uk

## **ENROLMENT FORM**

Child's Name .....

Please tick the box of the year group you are applying for. Thank you								
	The second of th							
Reception	Year 1	Year 2	Year 3	Year 4	Year 5	Year 6		
Nursery				Morning	Afternoons	30 hours		
If you are app	olying for a nu	ırsery place, i	olease					
indicate by tic	, ,							
•	•	•						
morning or afternoon sessions or whether it is a 30 hour application. Thank you								
πουι αμμιισαι	ion. Thank yo	u						
Nursery- 30 hour 11 digit eligibility code (if applicable)								

STRICTLY PRIVATE & CONFIDENTIAL

# **PUPIL DETAILS** Child's Surname: First Name: Middle Name(s) Known Name: **Female** Male Date of Birth: Place of birth: Home Address: Child's NHS number Home Telephone Number: Post Code: DETAILS OF EVERY PARENT/GUARDIAN (of the child with legal responsibility) (Birth parents usually have legal responsibility and this can only be removed and/or given to another person by a Court Order) Mother's Name: Parental Responsibility Yes / No Home Address: (if different to child) Home 2 Work 🖀 Mobile 🕿 Email: Father's Name: Parental Responsibility Yes / No Home Address: (if different to child) Home 🕿 Work 🖀 Mobile 🕿 Email:

Child Lives with Mum / Dad / Both Parents / Other (please specify)				
Does either parent currently serve in the UK Military?				
EMERGENCY CONTACTS				
Name:	R	elationship to c	hild i.e. Grandparent / Childminder / Friend	
Name:				
	R	elationship to c	hild i.e. Grandparent / Childminder / Friend	
Name:	R	elationship to c	hild i.e. Grandparent / Childminder / Friend	
SIBLINGS				
Number of children in family:				
Position in family: (e.g. oldest of 2)  NAME		AGE	SCHOOL	
NAME		AGE	SCHOOL	
PREVIOUS SCHOOL(S) / NURSERY/ PRE-SCHOOL ATTENDED				
Name				
Name				
Name				

#### TRAVEL TO AND FROM SCHOOL (please circle)

Walk	Cycle	Car/Van	Car Share (with a child/ren from a different household)	Bus	Taxi	Other	
THE SC	THE SCHOOL CAR PARK MUST NOT BE USED FOR DROPPING OFF AND PICKING UP YOUR CHILD						

#### **MEDICAL INFORMATION**

Doctor's name:		
Address:		
Telephone Number:		
Has your child been immunised?	YES / NO	
Has your child had their pre school booster?	YES / NO	
ANY MEDICAL INFORMATION OF WILIGHT HE CO	LICOL CHOULD DE AWADES	

#### ANY MEDICAL INFORMATION OF WHICH THE SCHOOL SHOULD BE AWARE?

(For example, medical conditions such as Asthma, Diabetes, Heart Condition, Sickle Cell, Eczema or Allergies, Hearing, Vision, Speech difficulties please specify):

## CHILD'S NEEDS: (i.e. Physical / Learning / Behaviour / Emotional (please specify)

Do you consider your child to have additional needs? (For example Statement of SEND) (Please give details)	YES / NO

### **OTHER AGENCIES**

Has your child had any involvement with any of the following agencies?				
Education Welfare Service	YES / NO	Behaviour Support Service	YES / NO	
Educational Psychologist	YES / NO	Social Services	YES / NO	
Speech Therapist	YES / NO	Any other service	YES / NO	
My child is looked after by the Local Authority (LAC)  YES / NO				
My child is adopted			YES / NO	

#### **SUPPORT WITH SCHOOL EXPENSES**

The School will receive additional money for some children, where parent income is low. This means the School can support you with additional costs such as school meals (KS2) and school visits. The school may also use this money to support your child in school.

The following information will be used by the School to check for eligibility to claim additional grant money (the 'Pupil Premium' from central government. It will be used for no other purpose and will remain confidential to the School.

I/We give the School permission to verify my/our eligibility for the Pupil Premium

YES / NO

MOTHER FULL NAME	DATE OF BIRTH
National Insurance Number or NASS Reference Number	
FATHER FULL NAME	DATE OF BIRTH
National Insurance Number or NASS Reference Number	

#### **LUNCHES**

All pupils in Reception, Year 1 and Year 2 receive a free hot meal every day. You may qualify for support with school expenses (free school meals) if you are entitled to one of the following benefits (forms to apply are available from the School Office):

- Income Support
- income-based Jobseekers Allowance
- income-related Employment and Support Allowance
- support under Part VI of the Immigration and Asylum Act 1999
- the guaranteed element of State Pension Credit
- Child Tax Credit (provided you're not also entitled to Working Tax Credit and have an annual gross income of no more than £16,190)
- Working Tax Credit run-on paid for 4 weeks after you stop qualifying for Working Tax Credit
- Universal Credit

Please circle which type of meal your child will be having every day.

#### FREE SCHOOL MEALS / PAID SCHOOL MEALS / PACKED LUNCH

School meals must be paid for in advance.

Currently we do not offer lunch to Nursery children. A snack is provided during the Nursery sessions.

DIETARY REQUIREMENTS:	
Diabetic	
Vegetarian	
Halal	
Allergy to Food	
Other (please specify)	
Additional Dietary Information	

## **RELIGION OF PUPIL** (please tick)

Christian	Jewish	
Buddhist	Sikh	
Hindu	No Religion	
Muslim	Other (please state)	
Jehovah's Witness	I do not wish religion to be recorded	

LANGUAGES
What languages can your child speak?
What is the main language spoken at home?
NATIONALITY (It is important this box is completed)
Any other information that will help us to support your child:
Any other information that will help us to support your child.

### **PARENTAL CONSENT**

Please read the following information carefully, delete the incorrect answer and sign at the bottom of this consent form. This form is to provide consent for your child to take part in certain activities or events that may occur frequently in school. Parents are requested to give blanket permission to such events. Your consent is valid for the period of time your child attends this school. Please inform the school if the consent needs to be amended at any time.

Welfare I give permission for school staff to administer first aid	YES / NO
I give permission for emergency treatment at hospital in the event of no parent/guardian present	YES / NO
Trips and Local visits  As part of the curriculum, there are times when a short visit to a local venue would be very beneficial to your child's education. These visits are often arranged at short notice and are often weather dependent. It is not practical to send a letter home every time this happens, but your consent is required for us to be allowed to take your child off site during the school day. I agree that my child may take part in any short visits to local venues with staff, which may be arranged during the school day.	YES / NO
Photographs  During your child's time at school we use digital media including photographs and video. We follow the guidelines set out in our policy when taking such images. We use them in a variety of ways within school (not published) but from time to time we may use them externally such as on our website, in our newsletter, on our Facebook page or in the school's prospectus. We don't generally print names with photos, although there are some exceptions where we may use a first name only.  Having read the above, I give permission for images of my child taken with digital media to be used in school published documents such as newsletter, prospectus and the school's website.  Sometimes external agencies and associations may wish to use images in their publicity or newspapers. We will ask for your consent if this is the case.  The school permits parents to take photographs of their own children during special events (e.g. Award celebrations, plays, performances and specting events). Parents should declare this at the event and agree not to publish any images of other	YES / NO
performances and sporting events). Parents should declare this at the event and agree not to publish any images of other children including via social media. If a parent does not want their child to be photographed in this way, they should discuss this with the school.	
Fruit The Government provides a daily piece of fruit for all children until they reach the end of Year 2. Other foods may be available to your child, e.g. as part of a curriculum activity or when another child is celebrating a birthday. We are allergy and health aware.  I give permission for my child to be offered *fruit/*other foods.	YES / NO
Milk At London Colney Primary and Nursery School all pupils in the Nursery and Reception (under 5) can have milk to drink in the morning break. This is free of charge, funded by the Government who will provide a 189ml carton of milk. All other pupils can have milk to drink in the morning break at a charge of 22p per day, paid in termly, in advance.  Would you be interested in purchasing milk for your child?	YES / NO
Sickness and Diarrhoea I understand that if my child suffers from vomiting and/or diarrhoea I will keep my child away from school until they have been free from the symptoms for 24 hours and 48 hours if in Early Years.	YES / NO
Communication The school uses a service called 'Schoolcomms' to send information by email and text message. Please confirm that the school can use your contact details for 'Schoolcomms' information.	YES / NO
Birth Certificate Please may we see your child's Birth Certificate for our records.	YES / NO
I have read and agreed to all of the above information and confirm that the information contained in this registration form is true to the best of my knowledge and belief.  Signed	

For Admin use only:	
Admission Date:	Class:
UPN:	Birth Certificate Date Seen:
Date CTF received:	