

Nursery Waiting List Application Form

Childs Details					
First Name(s)					
Surname					
Date of Birth			Gender	M / F	
Address					
Looked After Child by Local Authority?				Yes / NO	
Does your child have any special educational needs?			?	Yes / NO	
Any siblings already attending Ashlands?				Yes / NO	
Where did you hear ab	out Ashlands N	ursery?			
Name of parent / guardian					
rume or parome,	900101011				
Relationship to c	hild				
Relationship to c	IIIIG				
Homo phono num	nhor				
Home phone num	ilbei				
Email address					
Mobile					
Signature					

Please return this form to Ashlands Primary School, Leeds Road, Ilkley, LS29 8JY.

Completing this form does not guarantee a place in Ashlands nursery or a place in Ashlands Primary School.