

**Nursery 2023 -2024 Application.**  
**Please complete and return to the school office.**

Child's Name.....

Date of Birth: .....

Would you like your child to attend Glade Nursery 2023—2024? *Please circle your answers.*    **Yes/No**

If Yes, which session would you like? Please read the options carefully and put a tick in the table next to your choice.

- Option 1: Monday—Friday AM Session 08:45am—11:45am (15 hour week)
- Option 2: Monday—Friday PM Session 12:30pm—03:30pm (15 hour week)
- Option 3: Monday—Friday Full Day Session Including Lunch Club (30 hour week with £5 daily charge for Lunch Club)
- Option 4: Monday—Friday Full Day Session Not Including Lunch Club (30 hour week)

Option 1	
Option 2	
Option 3	
Option 4	

Please provide details of any medical conditions that the school should be aware of, and any emergency action that should be taken (e.g. Asthma, Epilepsy, Allergies to bee stings, nuts or particular medicines, etc.)

Please detail any court orders applying to the child (e.g. Ward of Court, Legal rights of access)

Siblings—If your child has any siblings who attend this school, please provide their names and dates of births.

Known Name	Surname	Date of Birth