



Newdigate Primary & Nursery School

REGISTRATION FORM



Please complete your child's details in block capitals – All sections must be completed

GENERAL INFORMATION (please print as shown on your child's birth certificate)

LEGAL SURNAME: _____ LEGAL FIRST NAME: _____

MIDDLE NAME(S): _____ DATE OF BIRTH: _____

GENDER (MALE/FEMALE): _____

HOME ADDRESS: _____

_____ POSTCODE: _____

HOME TELEPHONE NO: _____ EMAIL: _____

PARENT/GUARDIAN & EMERGENCY CONTACT DETAILS (please give details of **ALL** persons with legal parental responsibility and anyone else you wish to be contacted in an emergency. Place them in the order you wish for them to be contacted)

PRIORITY	FULL NAME	ADDRESS (inc postcode)	Relationship to child	Telephone Number (Home & Mobile)
1				
2				
3				
4				

PREVIOUS NURSERY/SCHOOL DETAILS

NURSERY/PLAYGROUP ATTENDED: _____

PREVIOUS SCHOOL ATTENDED: _____

MEDICAL INFORMATION

NAME OF DOCTOR: _____ TELEPHONE: _____

ADDRESS: _____

Please give details of any medical conditions including allergies: _____

DIETARY INFORMATION: _____

OTHER CHILDREN IN FAMILY

NAME	DATE OF BIRTH

OTHER INFORMATION

FAMILY NATIONALITY: _____ FIRST LANGUAGE: _____

FAMILY FAITH: _____ IN RECEIPT OF BENEFITS: yes/no

MODE OF TRANSPORT TO SCHOOL: walk ☐ car ☐ bus ☐ other _____**PERMISSIONS**

COOKING & TASTING ACTIVITIES: I am happy that my child is able to participate in these. I have noted any special medical conditions likely to affect health. ☐

WALKS & ACTIVITIES BEYOND SCHOOL GROUNDS: I give permission for my child to walk in the surrounding area with teachers/LSA's/Volunteers with DBS checks. ☐

CHANGE OF CLOTHING (FOUNDATION/KS1): I am happy that a member of staff will change my child's clothes if necessary. I understand that if there is a persistent toileting problem I may be asked to come to school to help staff with this. ☐

SIGNATURE: _____ (Parent/Guardian)

PRINT NAME: _____ DATE: _____