

## Application for Admission to **Bright Stars Preschool**



Child's Details

Legal surname			
Other surname used			
Forenames(s)			
Child's date of birth	/	Gender	Male / Female
Requested date to start at		Birth certificate	
Preschool		checked at	
		school	
	<u> </u>	3011001	
Child's home address			
Cima s nome address			
Date moved to this address			
Previous address –			
(if moved within two years)			
With whom does the child live?			
Details of those with Legal Pare	ntal Responsibility:		
Title	Mrs / Miss / Ms /Mr	Mrs / Miss / Ms /Mr	
Forename			
Surname			
Relationship to child			
Address if different from child			
Home number			
Mobile number			
Work number			
Email address			
Email address			
Others with parental responsib			
Title	Mr / Mrs / Miss / Ms		
Forename			
Surname			

Other playgroups or nurseries attended	Please name all plays		s previously attend	led
	School's Name and a	ddress		Dates
Current nursery or playgrou (or last attended)	p			
Previous				
Previous				
Reason for applying for a pla	ce			
Does the child have a				
Educational Health Care Pla		YES ,	<sup>/</sup> NO	
I consider my child to have				
Special Educational Needs				
Is the child in care of the Local Author	ity		If VEC N	Is most had a sail Authority
Does the child have any restrictions on t			II YES IV	lame the Local Authority
residency in the United Kingdom				
Please give details of two person	who are willing to be contacted	in case of emergency	if parent is not availabl	e
Contact priority	1			2
Name				
Address				
Telephone number				
Relationship to child				
Child's Doctor		Other clinic or hos	pital that child atten	ıds
GP Practice		Name		
Address		Address		
Telephone No.		Telephone No.		
My child is allergic to:				
Specific dietary requirements:				
My child has the following medical conditions				
My child takes the following daily medication:	Please state name of medical	ation and dose		

Religion	Anglican (CofE) Baptist	Buddhist	Christian	Hindu	Jewish	Muslim
(Please circle)	Roman Catholic Sikh	No Religion	Other			
Language	Please state the language that	your child speaks	at home, eg	g English,	Chinese, P	Polish, etc
Country of birth						
Nationality						
Ethnicity	Ethnicity descriptions are set be there is an ethnicity that best to discuss this, please contact	describes your chi		•		,,

Afghan	Chinese and any other ethnic group	Kosovan	Refused	White – Scottish
African Asian	Croatian	Kurdish	Sri Lankan Other	White – Welsh
Albanian	Egyptian	Latin/South/Central American	Sri Lankan Sinhalese	White + any other Asian Background
Any other Black background	Filipino	Lebanese	Sri Lankan Tamil	White and any other ethnic group
Arab	Greek	Malay	Thai	White and Black African
Asian and any other ethnic group	Greek Cypriot	Nepali	Traveller of Irish Heritage	White and Black Caribbean
Bangladeshi	Gypsy/Roma	Other Asian	Turkish	White and Indian
Black - African	Indian	Other Ethnic group	Turkish Cypriot	White and Pakistani
Black and any other ethnic group	Information not yet obtained	Other Mixed Background	Vietnamese	White Eastern European
Black Caribbean	Iranian	Other White British	White – Cornish	White
Bosnian-Herzegovinian	Iraqi	Pakistani	White – English	White Western European
Chinese	Japanese	Portuguese	White – Irish	

## **Parental Consent for Using Images of Children**

In order to comply with Data Protection laws we need your permission before we can photograph or make any recordings of your child (not including photographs for safeguarding and health & safety purposes). Please sign below if you are in agreement with the following. Please note this form is valid for seven years from the date you sign it, or for the period of time your child attends this school. It is your responsibility to let us know if you want to withdraw or change your agreement at any time.

## Parent/Carer Signature (please sign each line to signal your Do you give consent? Category agreement) (please circle) Internal School Photographer YES / NO YES / NO External Professional School Photographer YES / NO Social Media (school Facebook page) YES / NO **School Website School Prospectus** YES / NO **School Displays** YES / NO School Achievement Videos YES / NO YES / NO **School Promotional Videos** YES / NO **Brochures & Blogs** Local media / newspapers YES / NO

	Parent/ Guardian of : Signature:
	<b>Data Protection Act 1998:</b> The school is registered under the Data Protection Act for holding personal data. The school has a duty to protect this information and to keep it up to date. The school is required to share some of the data with the Local Authority and with the DfE.
F	In the event of my child requiring emergency treatment and The Preschool Leader (or his / her representative) being unable to contact me, I give consent for the member of staff accompanying my child to approve the application of any emergency treatment including anaesthetic advised by the medical authorities for the well-being of my child.
<i>&gt;</i>	Date of last anti-tetanus injection
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