Saint Joseph's Catholic Primary Voluntary Academy



Enrolment Form

Admission Date:			
Child's Name:			
Ethnicity:			
Email Address:			
Date of Birth:	(Please provide birth certificate)		
Religion:	Parish:		
Date and Place of Baptism (in baptism certificate)	f applicable) (Please provide		
Other Sacraments received (i	f applicable)		
Position in the Family:			
Previous School (if any):			
Address:			
Telephone:			
Date of Admission:	Date of Leaving:		
Infant Pupils only:			
Nursery/{Playgroup attended (if any)			
Date of Admission:			
Luncheon Arrangements:	School Meal/Packed Lunch		
Means of Travel:	Walk/Car/School Bus/Public Bus/Taxi		
(Please delete as necessary)			
Names of any siblings already attending Saint Joseph's Catholic Academy:			
•••••	••••••		

Names and A	ddresses of Persons Person 1	with Parental Responsibility: Person 2				
Surname:						
Forename:						
Address:						
Postcode:						
Telephone:						
Mobile:						
If your child is ill at anytime it is vital that we are able to contact someone immediately. If these details are changed in any way at any time it is imperative that the school office is notified straight away. Failure to do so could result in unnecessary distress for your child!						
Emergency C	Contacts: Person 1	Person 2				
Surname:						
Forename:						
Address:						
Postcode:						
Telephone:						
Mobile:						
Doctor's Nam	e:	Telephone No:				
	e any special medica relevant to the school	l or behavioural problems that your child suffers:				

BOOKING FORM.

	Monday	Tuesday	Wednesday	Thursday	Friday
Breakfast Club 8.00 onwards					
Morning 08:45 - 11:45					
Lunch 11:45 - 12:15 (Extra cost)					
Afternoon 12:15 - 15:15			N/A		

Please indicate preferred sessions. Your child is entitled to 5 sessions as part of their 15 hours funding.

Please note that breakfast club and after school care are not offered as part of the 15 hours.

Extra session costs;

Once your child has settled in with us and if there is space we may be able to offer additional paid for sessions. These will be £14 a session. Lunch time sessions from 11:45 to 12:15 are £2.00 for a school meal plus £2.00 supervision or a packed lunch and £2.00 supervision. Breakfast session $07.45-08.00 \pm 1$ for child care then from 08.00-08:45 free including breakfast

Bookings will need to be made in advance.

Please contact the office for more details:

Telephone: 01472 690672

Email: office@sjp.academy please mark your email NURSERY

Home visits.

Starting nursery is a huge step and one we all want to 'get it right', therefore we feel it is important to visit the child in their home. This way you will have plenty of opportunity to really tell Miss Hickling/Mrs McHugh all about your child, their needs, your concerns etc.

These will take place during the week before your child is due to start with us and we will confirm the dates nearer the time.

Name of Child:	
D.O.B	_
Contact Number	
Email address:	
Address where visit is	to take place. (please include post code)

Confirmation of place.

We will be in touch to confirm that there is a place for your child when the form is received. We will send a letter with more details including sessions allocated during the half term before your child is due to start with us. This will include a date where you can look around the Nursery with your child and join us for a settling in session.

If you would like to look around the Nursery prior to this please contact the school office on 01472 690672.