

Please complete and return to school

Application Form for a Nursery place

BARLBY COMMUNITY PRIMARY SCHOOL

Hill Top, Barlby, Selby. YO8 5JQ Telephone: 01757 703317

Name of Child Date of Birth

Home Address

.....Post Code

Home Telephone

Mother's Name and Address

.....

Mobile No.

Place of Employment

Work Telephone

Father's Name and Address.....

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Mobile No.

Place of Employment.....

Work Telephone

Name of person(s) with parental responsibility.....

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Please list name and date of birth of any other children you may have.

Name	Date of Birth
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