



Year 2 & Junior Site:

Newstead Road,

Lee,

London

SE12 0SJ

Tel: 0208 857 8792

Early Years Site:

103 Effingham Road,

Lee,

London

SE12 8NS

Tel: 0208 852 0187

Deputy: Mrs Michelle Carey Deputy: Ms Sheelagh Campbell

Headteacher: Miss Margaret Hanrahan

Email: admin@swcps.lewisham.sch.uk Web site: http://www.swcps.lewisham.sch.uk

**NURSERY REGISTRATION FORM**

Child’s surname: ..…………………………………………………………….………..

Child’s first name(s): ……………………………………………………………………

Date of birth: ……………………………………… Gender: Male/Female

Address: ………………………………………………………………………………………….. In parish

Out of parish

Postcode: ……………… Daytime telephone number: …………………………….

Religion of child …………………………………………….

Date of Baptism [if applicable] ……………………………………….

**I UNDERSTAND THAT MY CHILD’S NAME HAS BEEN REGISTERED. I UNDERSTAND THAT I WILL STILL NEED TO FILL IN AN APPLICATION FORM FOR A NURSERY PLACE. THE FORM MUST BE SUBMITTED BY 1ST MARCH.**

Signed ………………………………………………………...(Parent / Carer)

Date …………………………………….

**THE SCHOOL’S ADMISSIONS POLICY CAN BE VIEWED AT: www.swcps.lewisham.sch.uk**

*Data Protection Act 1998: The school is registered under the Data Protection Act for holding personal data. The school has a duty to protect this information and keep it up to date. The school is required to share some of the data with the Local Authority and with the DfES.*

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To be completed by the school In parish

Out of parish

**ST WINIFRED’S CATHOLIC PRIMARY SCHOOL**

**ACKNOWLEDGEMENT OF REGISTRATION FOR NURSERY**

Child’s name ………………………………………….…Date of birth ……………

Signed …………………………………… (on behalf of the school) Date ……………………..

You will be sent a nursery application form early in February …………., which will need to be returned to school by 1st March.