



Admission Form

Registration Details You are required to provide this information to allow us to register your child with the school		
Forename (as on Birth Certificate)	Other names (also known as)	Surname (<u>Legal</u> not preferred)
If appropriate, underline the forename by which your child is known		Date of Birth
Current Home Address		
		M F
If the above is on a military camp, what is the name of the camp?		

Details of the people who have legal parental responsibility for this child				
The Education Act 1996 defines a parent to include the natural parents of the child as well as a person: (a) who is not a parent but who has parental responsibility, or (b) who has care of the child.				
Relationship to your child	Mr, Ms, Mrs etc	Forename	Surname	Home address, if different from your child's
☎ Daytime		☎ Evening		☎ Mobile
				Please tick if serving in the armed forces <input type="checkbox"/>
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☎ Daytime		☎ Evening		☎ Mobile
				Please tick if serving in the armed forces <input type="checkbox"/>

Additional Emergency Contacts - People other than the above who can be contacted in an emergency				
Relationship to your child	Mr, Ms, Mrs etc	Forename	Surname	Home address, if different from your child's
☎ Daytime		☎ Evening		☎ Mobile

Name(s) of any siblings attending Thomas Bullock Church of England Primary Academy

Name(s)	Class

Is your child entitled to the 30 hours a week free Early Education and Childcare? **Yes / No**
Please tick to indicate which sessions you would like.
 Free entitlement is either 5 or 10 sessions at The Ark Nursery depending on your entitlement.
 We offer a lunch wrap around care for those who require a full day at Nursery. This is between 12.30 to 1pm.
 Parents will need to provide a packed lunch for their child or a school meal can be purchased via the Parentmail app for a cost of £2.35 a day.

	Monday	Tuesday	Wednesday	Thursday	Friday
Nursery Morning Session – 9am -12pm (3hr)					
Nursery Whole Day Session 8:45am -3:15pm (6½hr) excludes 30mins lunch (6hr learning)					

Doctor, health care & other specific arrangements

Name of doctor & surgery		Contact details of practice/health centre				
Has your child had a tetanus injection?		Yes	No	If yes, date		
INHALER	Does your child use one?	Yes	No	If yes, frequency taken		
	If yes, type of medication?					
Please give details below of other medical information relevant to your child's development and school life e.g. hearing, sight, allergies, diabetes, epilepsy.						
Does your child have a statement of special education needs?					Yes	No

If your child has other particular needs in relation to his/her education please describe them here

I give permission for my child to use plasters, alcohol free wipes and quick drying surgical hand gel		Yes	No	I give permission for my child to take part in food activities which form part of the curriculum		Yes	No
Please give below details of any special dietary requirements your child may have							

Ethnicity & faith			
Please tick the box that you believe best describes your child's ethnicity:			
White		Chinese	
British		Chinese	
Irish		Black or Black British	
Gypsy / Roma		Caribbean	
Traveller of Irish heritage		Angolan	
Albanian		Congolese	
Boznian-Herzogovenian		Ghanaian	
Croatian		Nigerian	
Greek/Greek Cypriot		Sierra Leonian	
Italian		Somali	
Kosovan		Sudanese	
Portuguese		Other Black African	
Serbian		Any other black background	
Turkish/Turkish Cypriot		Other ethnic groups	
Eastern European		Afghan	
Western European		Arab other	
White Other		Egyptian	
Mixed		Filipino	
White and Black Caribbean		Iranian	
White and Black African		Iraqi	
White and Pakistani		Japanese	
White and Indian		Korean	
White and any other Asian background		Kurdish	
Any other mixed background		Malay	
Asian and Asian British		Moroccan	
Indian		Thai	
Pakistani		Vietnamese	
Bangladeshi		An ethnic group not listed here	
Any other Asian background		I do not wish to have this recorded	
Religion:		What is the main language spoken at home?	

Please read the **Safeguarding Children Policy** which can be found at www.thomasbullock.dneat.org before completing the permissions overleaf. (a paper copy can be supplied on request)

Application for Free School Meals or Infant Age Pupils only can be found at <https://www.norfolk.gov.uk/education-and-learning/schools/school-meals-and-milk>

Lessons/Activities Away from the School Site		
There are occasions when teachers like to take their class, with help of Teaching Assistants and parent helpers, to a place of interest in the village or other nearby location. It would be of a great help to us in our planning and organisation of such off-site visits if you could grant permission for us to take your child away from school premises for this purpose.		
I give permission for my child to participate in off-site activities	Yes	No
Personal Information on the Internet		
I have read the school's Safeguarding Policy regarding E-safety and I give permission for:		
my child to have access to the internet	Yes	No
my child's work to be published on the internet (<i>please note it will only contain first name</i>)	Yes	No
My child's image to be used on the school's social media pages	Yes	No

Photography and use of Video Cameras – The Safe Use of Images

I have read the school's Safeguarding Policy regarding The Safe Use of Images and I give permission for:

The school photographer to take individual, family groups and class photographs of my child	Yes	No
The school to photograph or video my child for use within school	Yes	No
Photographs to be taken of my child for use on the school website or for use by the media at special events. (children's full names will not be used)	Yes	No

School updates and newsletters

We regularly send school newsletters and information electronically to parents. If you wish to receive them please write the email address to be used below. This will not be shared with third parties without your consent.

email address: _____

The information you have given on this form will be held by the school. It will be shared with Children's Services and other departments within Norfolk County Council in order to provide and plan services e.g. School Transport. It will be used to administer health, social and welfare care and will be shared with healthcare advisors, practitioners and other relevant agencies. It will be forwarded to your child's new school if and when s/he changes school. It will also be used for statutory returns and for research purposes.

All information given will be held in the strictest confidence under the requirements of the General Data Protection Regulations 2018

I note the above statement and believe the information provided in this form to be correct as of this date. I will inform the school of any changes that may occur whilst my child attends the school.

I / We understand that a place at The Ark Nursery does not guarantee a place in Thomas Bullock CofE Primary Academy.

Signed (Parent/Carer): _____

Date: _____

Thank you. When completed, please return this form to the school.

For School Office Use

Date Received at School/Enquiry Made:		Member of Staff who took the enquiry:	
Proof of birth certificate provided:		Date offer letter confirmation sent with first term's invoice:	
Correct UPN recorded		Class allocated:	