



Meriden C of E Primary School
Fillongley Road
Meriden
CV7 7LW

01676 522488

Application for a nursery place

Child's details

Surname			
Forename		Gender	
Middle name		Date of birth	
Current childcare			

Home address

Flat no / building name			
Number / street			
District			
Town		Post code	

Contact details for parent/carer

Title: Mr/Mrs/Miss/Ms		Phone (day)	
Surname		Phone (evening)	
Forename		Phone (mobile)	
Email address			
Relationship to child		Do you have parental responsibility?	Yes / No

Brothers or sisters who will be attending at the same time

Name:		DOB:	
Name:		DOB:	
Name:		DOB:	
Name:		DOB:	

Additional information about your child

Does your child have an education, health and care plan?	Yes / No
Is your child "looked after" by a local authority (in care)?	Yes / No
If yes, which local authority?	
Are you taking up part of your provision with another provider?	
If yes, name the provider	
If you have been offered provision elsewhere be sure to let everyone know where your child is going to attend	

Please return this application form to:

Meriden C of E Primary School
Fillongley Road, Meriden CV7 7LW
office@meriden.solihull.sch.uk
01676 522488



Friends, Faith and Lifelong Learning