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2YRS NURSERY APPLICATION FORM

Name of Child: _____

Male/Female: _____

Child's Address: _____

Date of Birth: _____

Telephone No: _____

Home Language: _____

Email Address: _____

Previous Nursery: _____

Notice Given: _____

Speech & Language or any other development Concerns (eg. Toilet trained, diet, sleep routine)/Any other External Agencies working with your child?:

Voucher Code/Fee Paying: _____

Details of Siblings

NAME	Date of Birth	School – if any
_____	_____	_____
_____	_____	_____
_____	_____	_____

I have filled this form accurately; any inaccurate or misleading information may lead to the withdrawal of the place at the nursery.

Signed: _____ **Date:** _____

Print Name: _____

OFFICE USE ONLY:	
Received by: _____	Date: _____
Term of Admission: _____	