 **Skelton Primary School**

 **Nursery Enquiry Form**

Name of Child…………………………………………………………………………………….

Date of Birth..…………………………………………………………………………………….

Age……………….……………………………………………………………………………………

Gender…………………………………………………………………...............................

Sibling in school………………………………………………………………………………….

Address………………………………………………………………………………………………

…………………………………………………………………………………………………………..

Home Tel.…………………………………………………………………………………………..

Mobile……………………………………………………………………………………………….

Email………………………………………………………………………………………………….

Previous Nursery……………………………………………………………………………….

Special information e.g. allergies etc. .………………………………………………

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