

Trewirgie Infants' & Nursery School Nursery Registration Form

Full Name of Child (PLEASE PRINT) Date of Birth	
Telephone Number (Home)	
Mobile	
Email address	
	Trewirgie Infants' School or Junior
Any Information that the Scho	ool should be aware of:
(i.e. medical conditions or any special requirem	nents)
Signed (Parent/Guardian)	
(Please also Print name)	



Where the number of applications exceeds the number of places available in the nursery the governing body will use the following oversubscription criteria to prioritise applications for both funded and non-funded hours:

- Children in care and children who were in care, but immediately after being in care became subject to an Adoption, Child Arrangement or Special Guardianship Order
- Children who at the closing date for application live within the catchment area, whose parents have requested a place at the school and who at the time of admission will have a sibling attending Trewirgie Infants' & Nursery School or Trewirgie Junior School
- Children who at the closing date for application live outside the catchment area, whose parents have requested a place at the school and who at the time of admission will have a sibling attending Trewirgie Infants' & Nursery School or Trewirgie Junior School
- Children attending Trewirgie Infants' Nursery at the closing date for applications and whose parents have requested a place
- Children who at the closing date for application live within the catchment area, whose parents have requested a place at the school
- Children who at the closing date for application live outside the catchment area, whose parents have requested a place at the school