



**Gayhurst Community**

**Nursery Application Form**

Child's Name:	
Date of Birth:	Date of Admission:
Ethnicity:	Current Nursery
First Language:	
Other Languages:	
Parent 1 Name:	Parent 2 Name:
Mobile No:	Mobile No:
Work/college No:	Work/college No:
Email:	Email:
Home Address:	Additional address:
Home Telephone No:	
Carer:	Emergency Contact Name:
Home Telephone/Mobile No:	Home Telephone/Mobile No:
Work/college No:	
Emergency Contact Name:	Other Contact Name:
Home Telephone/Mobile No:	Home Telephone/Mobile No:
Who Can Collect:	
Diet	
Position in family: 1 2 3 4 5 6 7	
Siblings:	
Doctor's Surgery:	
G.P.	Telephone No:



<https://education.hackney.gov.uk/content/apply-free-school-meals>

### **Photographs in School (media release permission)**

I give consent for photographs/recordings taken that include my child taking part in school activities.

- Newsletters
- Video documentation of events
- Gayhurst School Website
- Social Media-School own account only and only Instagram is used.
- Websites approved by the school e.g.: educational sites

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

Attachments to be accompanied with the completed application form

Enclosed original utility bill received within the last two months

Enclosed proof of date of birth (Birth certificate)

Enclosed supporting evidence, if applicable (e.g a letter from the G.P/hospital consultant in support of any medical or social priority request)

**We can withdraw an offer of a place if it has proven that false or misleading information has been provided.**

### **Privacy Notice**

**For the purposes of the General Data Protection Regulation, we, the school are the Data Controller. We collect information from you and may receive information about you from previous childcare provider and Hackney Education Service. This information includes your contact details, personal characteristics such as ethnic group. Special educational needs and any relevant medical information. We will not give information about you to anyone outside the school/local authority without your consent unless law and rules allow us to. If you want to see a copy of the information we hold and share about you please contact the school office.**

**In completing and signing this form you are confirming that you have read and accepted this privacy notice.**

Signed \_\_\_\_\_ Date \_\_\_\_\_

