



Lockington CE VC Primary School

Headteacher: Mrs Julie Cattle

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Lockington Little Lights Nursery

Parental and Contact Information

CHILD'S SURNAME			
FORENAME(S)			
Date of Birth		Male/Female	
Home Address			
		Postcode	
Previous School/Nursery			
Birth Certificate seen		Admission Date	

***ORDER FOR CONTACT**

In the event of your child being ill at school, please state the order in which you wish us to call the named contact below.

Mother's Full Name		Title	
Home Address			
		Postcode	
Home Telephone		Mobile	
Work Telephone		Email	
Does this person have legal Parental Responsibility?		Yes/No	
Does the child live at this address?	Yes/No	*Order for Contact	

Father's Full Name		Title	
Home Address			
		Postcode	
Home Telephone		Mobile	
Work Telephone		Email	
Does this person have legal Parental Responsibility?		Yes/No	
Does the child live at this address?	Yes/No	*Order for Contact	

OTHER CONTACT

Full Name		Title	
Home Address			
		Postcode	
Home Telephone		Mobile	
Work Telephone		Email	
Does this person have legal Parental Responsibility?		Yes/No	
Relationship to Child		*Order for Contact	

OTHER CONTACT

Full Name		Title	
Home Address			
		Postcode	
Home Telephone		Mobile	
Work Telephone		Email	
Does this person have legal Parental Responsibility?		Yes/No	
Relationship to Child		*Order for Contact	

OTHER INFORMATION

Ethnic Origin		Country of Birth	
Nationality		Home Language	
Religion			

The following information is relevant to the school being eligible for valuable extra funding through the Pupil Premium. Details are on our website.

Has your child ever been entitled to Free School Meals Yes / No

Has your child ever been a "Service Child" (Parent in HM Forces)? Yes / No

Has your child formerly been in Local Authority care prior to adoption? Yes / No

This form must be signed by someone with parental responsibility. Please keep the school informed of any changes to the above contact details.

Signed: Parent/Carer

Name: (Please Print Name)

Date: