



INITIAL APPLICATION FORM
WEEKDAY / WEEKEND

Please complete the form below in order for your child to be placed on the **waiting list**, and return the completed form (with no additional papers attached) to the Madrasa with **£10 in cash**. This admin fee **does not** guarantee a place for your child. When your child turns **5 years** and/or a suitable place is available you will be contacted. **You should only submit this form if your child is 4 years old or over. The Madrasa will NOT accept your application if the child is younger than this.**

Child's details

Surname	
First name	
Address	
Post Code	
Gender	
Date of Birth	

Current /Previous Schooling (if applicable)

Date: From	To	Name, Address and Telephone number

Family Details

Who has parental responsibility for the child?	Father / Mother / Joint / Guardian (Please circle)
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Father/Male Guardians' Name			
Occupation		Daytime contact number	
Email address			
Mother/ Female Guardian's Name			
Occupation		Daytime contact number	
Email address			

Please provide information about the child's siblings (brothers and sisters) attending Madrasa

Full name	Age	Date Joined and Date Left (if applicable)

Medical conditions

Does your child have any medical condition, illness or allergies that the Madrasa should be made aware of?
Are all immunisations up to date? Yes / No

Special Educational Needs Does your child have any special educational needs? YES/NO

- I will advise you in writing of any changes to the above as soon as they arise.
- I confirm all the information above is accurate and understand that any misleading information could affect the child's placement at Madrasa.
- I enclose the £10 waiting list fee with this application.

Parents' Full Names _____

Signatures _____ Date _____

Date Received:

Payment Received:

