

OFFICE USE ONLY	
Taster date:	
First session invoice from:	
regular group M/ T/ W /Th am/ Th pm	
Baby Gp- Fri am	
Waiting List	



CONFIDENTIAL BRISTOL STEINER SCHOOL

REDLAND HILL, BRISTOL BS6 6UX
Telephone 0117 933 9990

PARENT & CHILD GROUP APPLICATION FORM

To be completed by parents or guardians. If your child will be attending with another carer, please also complete the Carer/Guardian details overleaf.

THE CHILD

SURNAME (as on birth certificate or legal declaration):	
FORENAMES (as on birth certificate or legal declaration):	
PREFERRED NAMES:	
MALE/FEMALE:	DATE OF BIRTH:
NATIONALITY:	PLACE OF BIRTH:

PARENT/GUARDIAN No. 1 *The child's primary carer, at the address where the child normally resides*

SURNAME (as on birth certificate or legal declaration):	
FORENAMES (as on birth certificate or legal declaration):	
PREFERRED NAMES:	
RELATIONSHIP TO CHILD:	
ADDRESS: DISTRICT:	
POSTCODE:	HOME TEL:
MOBILE:	E-MAIL:
WORK ADDRESS:	WORK TEL:

PARENT/GUARDIAN No. 2

SURNAME (as on birth certificate or legal declaration):	
FORENAMES (as on birth certificate or legal declaration):	
PREFERRED NAMES:	
RELATIONSHIP TO CHILD:	
ADDRESS: DISTRICT:	
POSTCODE:	HOME TEL:
MOBILE:	E-MAIL:
WORK ADDRESS:	WORK TEL:

CARER/GUARDIAN *who will be attending the sessions if different from the above*

SURNAME (as on birth certificate or legal declaration):	
FORENAMES (as on birth certificate or legal declaration):	
PREFERRED NAMES:	
RELATIONSHIP TO CHILD:	
ADDRESS: DISTRICT:	
POSTCODE:	HOME TEL:
MOBILE:	E-MAIL:
WORK ADDRESS:	WORK TEL:

BROTHERS & SISTERS

NAME	DATE OF BIRTH	CURRENT SCHOOL/SETTING

ACTIVITIES

Does your child attend any other settings/groups? <i>Please give names & addresses</i>

SPECIAL REQUIREMENTS

<i>Please give details of allergies, medical conditions, dietary requirements etc.</i>

PARENT & CHILD GROUP SESSIONS

Monday, Tuesday, Wednesday mornings, & Thursday am / pm during term time – <i>please indicate your preference</i>	
1st choice	
2nd choice	
3rd choice	

I wish to join a Parent & Child Session at the Bristol Steiner School and I declare that I have given full and accurate information on this form.

SIGNATURE..... Date of application.....

NAME..... Preferred Start Date.....

All information disclosed on this form or gathered from a current or previous school/setting, is strictly confidential and is covered by the Data Protection Acts, 1998 & 2018.