Thank you for expressing an interest in a place for your child at Lothersdale Primary School (part of Yorkshire Collaborative Academy Trust). Please complete the details below and return this form by email to: **lothersdale@ycatschools.co.uk** or by post to **Lothersdale Primary School, Lothersdale, BD20 8HB**.

Once the form has been received, your child’s name will be placed on the school’s Register of Interest and confirmation of receipt of the application form will be returned to you for your reference. Please note this does not constitute an offer of a place.

Local Authority details of the school application process will be sent out to you – this is usually in the October prior to entry to primary school.

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| **YOUR CHILD’S DETAILS** |
| **Child’s Surname:** Click or tap here to enter text. **Gender:** Choose an item. |
| **Child’s Legal Surname *(if different from above):*** Click or tap here to enter text. |
| **Forename and Middle Name:** Click or tap here to enter text. |
| **Preferred (known) Forename:** Click or tap here to enter text. **Date of Birth:** Click or tap to enter a date. |
| **Home Address:**Click or tap here to enter text. |
| **Names of siblings currently at Lothersdale Primary School *(if applicable)*:**Click or tap here to enter text. |
| **Name and address of current educational setting *(eg. Nursery/Playgroup)*:**Click or tap here to enter text. |

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| **PARENTS/CARERS’ DETAILS** |
| **Mother’s Full Name:** Click or tap here to enter text. | **Title:** Choose an item. |
| **Home Address:** Click or tap here to enter text. |
| **Mobile No:** Click or tap here to enter text. | **Email address:** Click or tap here to enter text. |
| **Father’s Full Name:** Click or tap here to enter text. | **Title:** Choose an item. |
| **Home Address:** Click or tap here to enter text. |
| **Mobile No:** Click or tap here to enter text. | **Email address:** Click or tap here to enter text. |

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| **Signature of Parent/Carer:** Click or tap here to enter text. | **Date:** Click or tap to enter a date. |