



APPLICATION FORM

Child's Full Name:		
Date of Birth:		
Legal Contact Name:		
Address:		
Contact Number/s:	Home:	Mobile:
Any other siblings within Oasis Academy:	Y/N	Name/s:

SESSIONS REQUIRED

	MON	TUES	WED	THURS	FRI
A.M. @ £12.75* per session					
HOT MEAL@£3.00					
P.M. @ £12.75* per session					

**sessions are only payable when exceeded maximum entitlement of funded hours*

**Please provide evidence of 2 year old funding (if applicable) and birth certificate*

Signature of parent/carer:	
Date:	

FOR OFFICE USE ONLY

Confirmation of Eligibility: **Copy of Birth Certificate:** **WCC Parent Declaration Form:**

Offered Place:

Principal – Mr Matt Meckin

Edgeworth Close, Worcester, WR4 9PE

Tel: 01905 453530 . www.oasisacademywarndon.org