



Working, Praying, Sharing  
&  
Learning Together

**St Mary's R.C. Primary School**  
**Application for Admission**  
**CONFIDENTIAL**

<b>Name of Child:</b>	<b>Address:</b> _____ _____ <b>Post Code:</b>
<b>Date of Birth:</b>	<b>Emergency Contact No:</b> 1. 2.
<b>Name of Parent/Guardian(s):</b>	<b>Address if different:</b>  <b>Post Code:</b>
<b>Home Telephone No:</b>	<b>Mobile No:</b>
<b>Doctor:</b>	<b>Any Medical Conditions:</b>
<b>Telephone No:</b>	
<b>Child's Religion:</b>	<b>Siblings currently attending St Mary's RC:</b>
<b>Baptised/Christened</b> <b>Yes/No</b>	
<b>Child's First Language:</b>	<b>Child's Nationality:</b>
<b>Child's Previous School:</b>	<b>Any Other Information:</b>

**For office use only:**

Date Received:

UPN No:

Admission No: