

Supplementary information

All information on this form is confidential and is processed in compliance with the data protection act 1998

Please fill out all sections of this form in BLOCK CAPITALS

Section 1: Personal Details

Child's first name	Child's other name(s)
Child's last name	Known as:
Date of birth	Gender (circle one) boy/girl
Child's address	
Telephone	Full post code

Section 2: Family Details:

Mother/Guardian full name	
Address if different from the Child's:	
Telephone:	full post code:

Father/Guardian's full name	
Address if different from child's	
Telephone:	full post code:

Details of siblings attending this school

Name(s)	Date of birth
1.	
2.	
3.	

Section 3. Nursery provision

Does your child attend nursery?	
Yes	No
Nursery Details	
Name of nursery _____	
Nursery phone number _____	

Section 4. Religion

Child's religion	
Do you regularly attend a place of worship?	
Name and address of place of worship(if not at H.T&S.S.a letter of reference should be supplied to confirm this)	

As part of the curriculum regular educational visits will take place. You will of course, be notified by letter. Please give your consent by signing below.

Signature of parent/guardian: _____

Date: _____