



Catholic Primary Schools in Greenwich Supplementary Information Form 2017/2018

Please complete Section 1 in CAPITAL LETTERS before asking your Priest to sign the reference section below

Holy FamilyNotre DameOur Lady of GraceSt Joseph'sSt Mary'sSt Patrick'sSt Peter'sSt Thomas a BecketSt Thomas More

Name of child:	known as:		Mo	ıle/ Female
Family Name:	 	Date of Birth	/ /	
Is the child Looked After? Y/N	Or	Previously Looked	d After?	Y/N
Parents/ Carers Name/s (please print) Mr/ Mrs/ Ms/ Miss		Member of UK A		
Contact number:		Relationship _		
Mr/ Mrs/ Ms/ Miss		 		
Contact number:		Relationship _		
Home Address of child:				
Brother or sister currently attendingyear	(Name School)			_ year
Religion:		_		
Section 2 I/We attend Mass: weekly fo				
Signed			Date	/ /
Parent/Carer				
Address of Church Attended:		Post Code: _		
<u>Priests Reference:</u> Please note that	the <u>above sect</u>			
Parish Seal		betore	e this sec	tion is signed
	I can / c	annot agree with	the state	ement above
	Please Prin	t Name:		
	Church:			
	Signed:			
	-		Date:	

The <u>original</u> of <u>this form</u> and your child's <u>Baptismal Certificate</u> must be taken to each primary school you choose to apply for, so that they may be photocopied - <u>Both this and</u> the <u>Royal Greenwich</u> Common Application Form MUST be submitted by on time- <u>See Royal Greenwich Borough dates</u>