***Please include all this information on your***

***headed paper.***

To

St Mary Magdalene C of E Primary School

Kingsman Street

Woolwich

SE18 5PW

Date:

Child’s name and Date of Birth:

Parent(s) Name(s):

***Please state if your church is:***

1. Anglican Church.
2. Full member of Churches Together in Britain and Ireland (CTBI).
3. Full member of the Evangelical Alliance (EA).
4. Any Other.

If your church is part of the Evangelical Alliance please state the membership number:

Please state how many years/months the family have been worshiping at your church:

How often does the family attend the church (weekly/fortnightly/monthly) please specify:

Church leader signature and title:

If the letter does not contain all the above information, then the application will not be complete. Without all the information the applicant may not be considered for a foundation place.

**EXAMPLE**

**To:** St Mary Magdalene C of E Primary School

Kingsman Street

Woolwich

SE18 5PW

**Date:** 16.03.2016

**Childs name and D.O.B :** Mary Magdalene 01.01.2001

**Parents Name:** Mr and Mrs Magdalene

**Evangelical Alliance:** Membership number 1000011

**Attendance at church**: 10 years

**Frequency of attendance:** Once a month

**Reverend:** Daniel Day