

CONFIDENTIAL
ST MARY'S CATHOLIC PRIMARY SCHOOL
Information Required for Pupils Records

Surname..... Forename.....

Date of Birth..... Home Address.....

Parent 1 Mobile No..... Parent 2 Mobile No.....

Email Address.....

NHS Number..... Doctor's Name & Address.....

Please inform the school if your child has seen a speech therapist or has any medical needs.

Name & Address of Church where Baptised.....

..... Date of Baptism.....

Pre-school Education (playgroup/nursery).....

Name & Address of school last attended.....

Position in Family: 1, 2, 3, 4, 5, 6, (please indicate with circle)

Language most spoken at home.....

Father's Forename..... Religion.....

Father's Occupation..... Country of Origin.....

Mother's Forename..... Religion.....

Mother's Occupation..... Country of Origin.....

Parent's place of work & telephone No

IN AN EMERGENCY WE NEED TO HAVE (other than the above)

Contact Person.....
Address &
Telephone Number.....

Contact Person.....
Address &
Telephone Number.....

Council Tax paid to the Borough of.....

Signature of Parents/Guardians..... Date.....

PLEASE NOTIFY THE SCHOOL OF ANY CHANGES TO THE ABOVE.