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| DIOCESE OF SALFORD - Supplementary Admission Form ***ST. WILFRID’S R.C. PRIMARY SCHOOL - Lancashire School Number 06/69*** |

##### Please complete in BLOCK CAPITALS and return to school by 15th January (new starters in Reception) or immediately with your In-Year Admissions form for in-year admissions

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| Surname of child: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Forename(s): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Date of Birth: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

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| Address of child: |
|  |
| Postcode: |
| Your Telephone Number: |

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| Is your child? BAPTISED CATHOLIC □ NON CATHOLIC □ |
| **FOR BAPTISED CATHOLICS**  MONTH OF BAPTISM \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ YEAR\_\_\_\_\_\_\_\_\_\_\_\_  PARISH \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  PARISH LOCATION (TOWN/CITY) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

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| **PLEASE ENCLOSE A COPY OF BAPTISMAL CERTIFICATE WITH THIS FORM.**  If this is not possible explain below |

# To the best of my knowledge the information contained on this form is correct.

**Signed ……………………………… Name (Please Print)………………..….**

**Relation to child ………………………………… Date……………………..**