

REGISTRATION DETAILS – ST MARY’S CATHOLIC PRIMARY SCHOOL

Please complete all sections below so we can ensure we have the correct details on file for your child. Once completed please sign at the bottom of the page and return to the school office.

Year	
Surname	Forename.....
Middle Name	Chosen Name.....
Address	Date of Birth
.....	
.....	
Postcode	

Please give details of all persons who have parental responsibility and anyone else you wish to have contacted in an emergency. Place them in the order you wish them to be contacted.

Name	Relationship	Address	Home No	Mobile No
1.				
2.				
3.				
4.				
5.				

Does your son/daughter have any special medical needs? YES / NO. If yes please give details below:

Signature

Date

Full Name

The school will not share any of your personal data collected with external organisations unless required to do so by law. For further details on the School’s privacy arrangements please view the privacy page on the schools website.