

Gilsland Church of England Primary School.

Supplementary form to be used if applying for admission to our School on faith grounds

Name of your child: -

Surname _____

Forenames _____

Date of Birth _____

Boy

Girl

Name of parent(s)/carer(s)/guardian(s) _____

Address _____

Post Code _____

Telephone Number (daytime contact) _____

The name of an older sibling who will still be attending our School at the date of the proposed admission

The place(s) of Worship attended by at least one parent and the named child.

The name of the place(s) of Worship. _____

Address _____

The name of the Vicar/Priest/Minister/Faith Leader _____

Address and Postcode _____

Worship Attendance:

How frequently do you attend worship with your child?

Weekly

Fortnightly

For how long have you been so attending?

One Year

Two Years

Three Years or more

Your Church leader will be contacted to confirm the details on this form.

Signed (Parent/Carer/Guardian) _____