

Supplementary Information Form
Admission to Our Lady & St Patrick's Catholic Primary School

SURNAME OF CHILD _____

FORENAMES _____

DATE OF BIRTH _____

ADDRESS OF CHILD _____

POSTCODE _____

YOUR TELEPHONE NUMBER _____

IS YOUR CHILD

BAPTISED CATHOLIC _____ NON CATHOLIC _____

FOR BAPTISED CATHOLICS

MONTH OF BAPTISM _____ YEAR _____

PARISH _____

In relation to criteria (g)

NAME OF PARENT WHO IS BAPTISED CATHOLIC _____

You are asked to enclose a copy of the baptismal certificate with this form. If this is not possible explain below:

SIGNED _____ NAME (please print) _____

RELATIONSHIP _____ DATE _____