

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 \_\_\_\_\_