

SUPPLEMENTARY INFORMATION FORM: 2023 ADMISSIONS

Admission to St Joseph's Catholic primary School

Please complete in BLOCK CAPITALS and return to School by 4pm on Monday 1st November.

SURNAME OF CHILD: _____
FORENAME(S): _____
DATE OF BIRTH: _____

ADDRESS OF CHILD: _____

POSTCODE: _____
YOUR TELEPHONE NO: _____

IS YOUR CHILD
BAPTISED ROMAN CATHOLIC NON CATHOLIC

FOR BAPTISED ROMAN CATHOLICS
MONTH OF BAPTISM: _____ YEAR: _____
PARISH: _____
PARISH LOCATION (TOWN/CITY): _____

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: _____