

**ST. ANNE'S PRIMARY SCHOOL INFORMATION FORM**  
**(ALL INFORMATION STRICTLY CONFIDENTIAL)**  
**BLOCK CAPITALS THROUGHOUT**

FOR SCHOOL USE

Year: \_\_\_\_\_  
 Reg Group: \_\_\_\_\_  
 Admission No: \_\_\_\_\_

**Personal Information:**

Surname:	
First Christian Name:	
Middle Name(s):	
Name known by:	
Gender:	Male / Female*
Date of Birth:	
Address:	
Town:	
Postcode:	
Telephone No:	

**Contact Information**

<u>Mother/Guardian's</u>	
Full Name:	
Normal Address: (if different from pupil's)	
Town:	
Postcode:	
Work Telephone Number:	Extension: _____
E-Mail Address:	
Contact Priority	e.g. 1 <sup>st</sup> 2 <sup>nd</sup> 3 <sup>rd</sup>
<u>Father/Guardian's</u>	
Full Name:	
Normal Address: (if different from pupil's)	
Town:	
Postcode:	
Work Telephone Number:	Extension: _____
E-Mail Address:	
Contact Priority	e.g. 1 <sup>st</sup> 2 <sup>nd</sup> 3 <sup>rd</sup>

PTO

\_\_\_\_\_  
 \*delete as appropriate

**Contact: (if Parent/Guardian are unavailable)**

Name:	
Address:	
Town:	
Postcode:	
Telephone Number:	
Relationship to child:	

**Medical Information:**

Doctor's Name:	
Surgery Address:	
Postcode:	
Telephone No:	
Specific Medical Problems:	

**Any Other Relevant Information: (see Data Protection Sheet Attached)**

E.g. Legal issues pertaining to your child or issues regarding the use of photographs in school publications/newspapers/websites etc:

**General Information:**

Religion:	
Nationality:	
Date of Baptism:	
Place of Baptism:	
Home Language if not English:	
Method of Travel to and from School:	Bus/Car/Cycle/ Walk with parent supervision/ Walk unsupervised*
Bus Route:	
Usual Lunch arrangements:	School Lunch/Packed lunch/Home/Free meals*

**School History:**

Previous school(s)/nursery/playgroup:	From
	To

Signature: \_\_\_\_\_ (Parent/Guardian)

Date: \_\_\_\_\_

\*delete as appropriate