



Application for Admission to Immanuel & St Andrew Primary School

Northanger Road, Streatham, London, SW16 5SL

Tel: 020 8679 5005

www.immanuelchoollambeth.org.uk

@immanuelprimary

Please note that for pupil admission to our Reception Class for the academic year 2019-2020 this form must be completed and returned to our school office by 11/01/2019 at the latest.

Child's Surname:					
First Name(s):					
Boy:	<input type="checkbox"/>	Girl:	<input type="checkbox"/>	<i>(Please tick box)</i>	Date of Birth:
Address:					
Postcode:					
Father's Surname:				First Name:	
Fathers Tel No:				Fathers email address	
Mother's Surname:				First name:	
Mothers Tel No:				Mothers email address:	
<i>(or name of adult(s) with whom the child lives)</i>					
<i>Please tick to say whether the child has a brother or sister already attending the school, or a place applied for:</i>					
YES	<input type="checkbox"/>	Child's Name			No
Religious denomination:					
Church attended:					
Priest or Minister: <i>(who can be contacted by the Governors Admissions Committee)</i>		Name & Address:			
Previous School / Nursery Setting		Name & Address:			
Please give your reasons for wanting your child to attend this school:					
I apply for my child to be admitted to Immanuel & St Andrew C.E. Primary School. I declare that the details given above are correct.					
Details of person completing this form:					
Relationship to the child:					
Do you have parental responsibility:					
Signature:				Date:	
<input type="checkbox"/> <i>Please tick to confirm you have the consent of all adults listed on this form.</i>					
<i>If you are offered a place for your child, proof of residence will be required and the child's birth certificate.</i>					