

St Andrew's C of E Primary School

Kay Road, Stockwell, SW9 9DE

Date this form was registered:	Class (Office use only)	Date Stamp (Office use only)
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Child's Full Name:

Gender:

Date of Birth:

Home Address:	Home Telephone Number
	Post Code:

Languages spoken:

Parents Information	
Mother's name:	Father's name:
<i>Address if different from child's home address:</i>	<i>Address if different from child's home address:</i>
Work Telephone No:	Work Telephone No:
Mobile Telephone No:	Mobile Telephone No:
Languages Spoken at home:	Languages Spoken at home:
Ethnic Background:	Ethnic Background:
Country of Origin:	Country of Origin:

See attached details

Emergency Contact Details <i>(Please list in order of priority)</i>	
Name: 1 Relationship to child: Address: Telephone Number:	Name: 3 Relationship to child: Address: Telephone Number:
Name: 2 Relationship to child: Address: Telephone Number:	Name: 4 Relationship to child: Address: Telephone Number:

Are you a member of a Christian Church:	Yes	No	Name of Church:
Please attach reference of Vicar/Priest/Minister:			
If no, are you a member of another faith	Yes	No	Name of Faith:

Health and Special Needs			
Does your child suffer from a medical condition?	Yes	No	Name and Address of GP: Tel No:
If yes please give details			
<i>Please continue on a separate sheet if necessary</i>			
Does your child have any of the following?			
			Yes
			No
Allergies			
Impaired Vision			
Hearing Difficulties			
Learning Difficulties			
Special Needs	<i>Specify:</i>		
Statement	<i>Specify:</i>		

School Meals	School/Nursery/Creche Facilities Previously attended:	School/Nursery/Creche Facilities Previously attended:
<i>Please tick</i>	Name:	Name:
Paid Meals	Address:	Address:
Free Meals		
Packed Lunch		
Home	Telephone No:	Telephone No:
Reason for Leaving previous School/s		

I give permission for my child to be seen by the school nurse/Medical Officer. I give permission for my child to make short educational visits.	Signature of Parent/Guardian	<i>Delete as necessary</i>

Office Use Only

<i>Accept</i>		<i>Offer Date</i>		<i>Sibling</i>	
<i>Decline</i>		<i>Start Date</i>			
<i>In Catchment</i>	Yes	No	<i>Class</i>		

Headteacher: Miss Jayne Mitchell MA, Chair of Governors: Mr Andrew Brookes
School Business Manager: Ms Vivienne Adedze