



St Mary's
Catholic Primary School and Nursery

Pupil Registration Form

Following the implementation of The Children Act 1989, details of any adult with parental responsibility must be included on the school registration form.

Child's Details	
First Name Please underline the name usually used	
Surname	
Date of Birth	
Religion	
Home Language	
Nationality	
Country of Birth	
Main Email Address	
Home Address (incl. postcode)	
Home Telephone Number	
Previous School	

Emergency Contact	
Contact 1: Name Relationship Mobile Telephone Number Other Telephone Number	Work Home
Contact 2: Name Relationship Mobile Telephone Number Other Telephone Number	Work Home
Contact 3: Name Relationship Mobile Telephone Number Other Telephone Number	Work Home

Parental Information

Mother

Name
Address
Postcode
Contact Number

Father

Name
Address
Postcode
Contact Number

Others having Parental Responsibility

Name
Address
Postcode
Contact Number

Name
Address
Postcode
Contact Number

Medical Information

Child's Doctor:
Surgery Address:

Telephone Number:

Does your child have any medical conditions which the school need to be aware of? Y/ N

If yes, please give details:

Will medication need to be administered during the school day? Y/N

If yes, please give details:

Does your child have any Special Educational Needs which the school need to be aware of? Y/N

If yes, please give details below:

Family Information

Has your child any siblings currently on roll in the school Y / N

If yes, please state their names and year groups:

Lunch Arrangements

Please tick your child's lunch arrangements:

Hot School Meal

Packed Lunch provided from home

Travel Arrangements

Please tick your child's travel arrangements to and from school:

Bicycle

Car

Public Transport

School Bus

Walk

Baptism

Place and Date of child's baptism:

Baptismal Certificate Enclosed? Y/N

Confirmation of Detail

I understand the need to inform the school if any information regarding my child changes and I confirm that the above details are accurate.

Parent / carer Signature

Parent / carer Name

Date

Please complete the Ethnic Monitoring Questionnaire overleaf

Ethnic Monitoring

Our ethnic background describes how we think of ourselves. This may be based on many things, for example skin colour, language, culture, ancestry or family history. Ethnic background is not the same as nationality or country of birth.

Please tick one box only:

√	
	White
	British
	Irish
	Traveller of Irish Heritage
	Gypsy / Roma
	Any other white background
	Mixed
	White and Black Caribbean
	White and Black African
	White and Asian
	Any other mixed background
	Asian or Asian British
	Indian
	Pakistani
	Bangladeshi
	Any other Asian background
	Black or Black British
	Caribbean
	African
	Any other Black background
	Chinese
	Any other ethnic background
	I do not wish an ethnic background category to be recorded for my child

Information supplied by

Parent / carer Signature

Parent / carer Name

Date