St Mary's Catholic Primary School

High Road
Kells
Whitehaven
Cumbria
CA28 9PG

Tel: 01946 66356
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Application Form for a School or Nursery Place

Surname: _____

Forenames: _____

Date of Birth: _____

Town/Country of Birth: _____

Date and Place of Baptism: _____

Home address _____
& postcode: _____

Telephone Number: _____
e-mail address: _____

Mother's full name: _____

Father's full name: _____
Parent's address if different from above: _____

Who does the child normally live with? _____

Emergency contact name: _____
Telephone Number: _____
Relationship (if any) to child
e.g. grandparent/aunt/friend _____

Doctor's name & address: _____
Telephone number: _____

Does the child have any
Medical/Health conditions? _____

Does the child have any
Special Educational Needs? _____

Parent / Carer signature: _____ Date: _____

NPQH Leadership Development School
National College for School Leadership
creativefutures Cumbria
KIDSAFE UK Registered School
ACTIVEMARK 2008 REWARDING COMMITMENT
Healthy School
food for life PARTNERSHIP BRONZE

Headteacher: Mrs Susan Starkie B.Ed.

Registered Charity No. 1034949