

St Mary's Catholic Primary School

High Road
Kells
Whitehaven
Cumbria
CA28 9PG



Tel: 01946 66356
Fax: 01946 696013

e-mail: admin@kells-stmarys.cumbria.sch.uk

Application Form for a School or Nursery Place

Surname: _____

Christian Name(s): _____

Date of Birth: _____

Date and Place of Baptism: _____

Home Address: _____

Postcode: _____

Home Telephone Number: _____

Mother's full name: _____

Father's full name: _____

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 _____

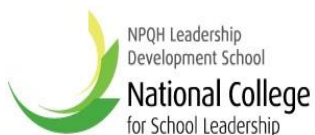
Doctor's name & address: _____

Telephone number: _____

Does the child have any
Medical/Health problems? _____

Does the child have any
Special Educational Needs? _____

Parent / Guardian signature: _____



Headteacher: Mrs Susan Starkie B.Ed.
Registered Charity No. 1034949