

ALL SAINTS ROMAN CATHOLIC SCHOOL  
GREEN LANE EAST  
THIRSK  
NORTH YORKSHIRE  
YO7 1NB

Headteacher: Mrs Mary Cobbold

Telephone: 01845 523058

APPLICATION TO ENTER RECEPTION SEPTEMBER 2018

SURNAME .....	SECOND NAME .....
FIRST NAME .....	GENDER MALE/FEMALE
NAME TO BE KNOWN AS .....	DATE OF BIRTH .....

Address .....  
.....  
..... Post Code: .....

Father's full name ..... Religion .....

Mother's full name ..... Religion .....

Pupils Legal Guardian .....

If separated, does the other parent have access to the pupil? .....

Is parent a member of the armed forces: YES/NO Mode of travel to school: Walk/Car/Cycle

Name(s) of Brothers/Sisters already at All Saints: Name ..... Class .....  
Name ..... Class .....

Names and date of birth of any other younger siblings: .....

Mobile Number and Home Telephone Number (inc code): .....

Email: .....

EMERGENCY 1. Daytime No (inc code): ..... Contact's Name.....  
& Relationship: .....  
2. Daytime No (inc code): ..... Contact's Name.....  
& Relationship: .....

Child's place of baptism: .....

Child's date of baptism: .....

Was the child baptised in a Catholic church? YES/NO  
**(Please supply a copy of your child's Baptism Certificate)**

Name of church usually attended: .....

Address (if not in Thirsk) .....  
.....

Name of current parish priest/minister .....  
Please use the space overleaf to give your reasons for wishing to send your child to All Saints School.  
(This will not be necessary if the child is a baptised Roman Catholic or already has brothers/sisters at the school.)