

Enrolment Form

for admission of new pupils to

Scoil Mhuire gan Smal, Lixnaw

Birth certificate and Baptismal certificate (if applicable) must be enclosed with this registration form

Name of Child: _____ Date of Birth: _____

Address: _____

Child's P.P.S. Number: _____

Child's place in family: _____

Method of coming to school: _____

Father's Name: _____ Mother's Name: _____

Mother's Maiden Name: _____

Home Telephone Number: _____

Father's Contact Details: (Work) _____ (Mobile) _____

Father's Occupation : _____

Mother's Contact Details: (Work) _____ (Mobile) _____

Mother's Occupation: _____

Number to be used for Text-A-Parent system: _____

*Please inform the school if any of these numbers are changed

Name of Emergency Contact: _____ Number: _____

Religion: _____ Date and Place of Baptism: _____

Name of Family Doctor: _____ Medical Card No: _____

Do you agree to adopt the school uniform? Yes/No _____

Do you agree to adopt the 'Code of Behaviour'? Yes/No _____

Do you agree to allow school staff to administer First Aid to your child eg plasters, ice packs etc? Yes/No _____

Scoil Mhuire gan Smal is a Catholic School and Religious Education is provided for the pupils in accordance with the doctrine and tradition of the Catholic Church.

Do you wish your child to participate in the religion programme of the school?

Yes/ No _____

Has your child ever been referred to an eye or ear specialist, speech therapist or occupational therapist? Yes/No _____

If yes, please give details _____

Do you give permission for your child's photo to be taken as part of school related events eg. concerts, sports activities etc and for these photos to be published in local publications eg. Kerrys Eye, The Kerryman _____

Signature of Parent / Guardian : _____

Date: _____
