

# St Luke's Catholic Primary School



## INITIAL REGISTRATION FORM

Childs Surname \_\_\_\_\_

First Name(s) \_\_\_\_\_

Date of birth \_\_\_\_\_

Religion \_\_\_\_\_ Date of Baptism \_\_\_\_\_

Parish \_\_\_\_\_

**PLEASE ATTACH A COPY OF YOUR CHILD'S BAPTISM CERTIFICATE**

IS YOUR CHILD, OR HAVE THEY EVER BEEN, IN THE CARE OF (LOOKED AFTER BY) THE LOCAL AUTHORITY?  
YES / NO

Parent / Guardian

Names \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Post Code \_\_\_\_\_ Telephone Number \_\_\_\_\_

If there is any further information you feel we should know, please comment below:

\_\_\_\_\_

\_\_\_\_\_

Please ensure you have also applied for a school place via Telford & Wrekin Council: [www.telford.gov.uk](http://www.telford.gov.uk)

For school use only:

Sibling \_\_\_\_\_ Non R/C \_\_\_\_\_

Date/Term for admission \_\_\_\_\_