

St. George's Roman Catholic Primary School York **Supplementary Information Form**



HILD'S DETAILS:

01 HED 7 DE 17 HE7.						
Child's surname:			Chile	Child's forename:		
Middle name(s)			Cho	Chosen name(s)		
Date of Birth:			Gen	Gender:		
Address						
				Postcode:		
≅Home: M	Mobile:		e-m	e-mail address:		
Any brothers or sisters (please give name/s and date/s of birth)						
CHILD'S RELIGION (Please provide proof of Baptism)						
Child's Religion Date of Bapti			Place of Baptism			
		Васс от Вариян	sate of Baptism			
PARENTS' DETAILS:						
MOTHER'S Surname TITLE (Mrs/Miss/Ms/Dr) Fore				<u>:R'S</u> Surname (Mr/Dr)	Forename	
Relig		ion			Religion	
Address (if different from above)			Address (if different from above)			
Work place and phone number			Work place and phone number			
Name, address and telephone number of previous schools or nursery						
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~ I give my permission for St George's RC School YORK to process this information ~						
- I give my per	וטוכנוווו	i ioi ji deoige i RC	JC11001	TORK to process till	J IIIOIIIIQUOII	
SIGNED: PARENT/GUARDIAN				DATE:		