



## St. Martin's Catholic Primary School

Executive Head: Mrs M Buller  
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### SUPPLEMENTARY FORM

#### CHILD'S DETAILS

CHILD'S SURNAME .....

CHILD'S FORENAME .....

DATE OF BIRTH .....

ADDRESS .....

.....

.....

POSTCODE ..... HOME TELEPHONE .....

MOBILE TELEPHONE .....

#### RELIGIOUS INFORMATION

IS YOUR CHILD A BAPTISED CATHOLIC?.....DATE OF BAPTISM ...../...../.....

PLACE OF BAPTISM .....

**Please enclose Baptismal Certificate (original will be returned)**

SIGNATURE OF PARENT/GUARDIAN .....

PLEASE PRINT NAME IN BLOCK CAPITALS .....

DATE ...../...../.....