



# St. Gabriel's Church of England Primary School Record of Parental Interest for Admission

**Name of child:**

Surname: ..... Forename: .....

Date of birth: .....

Boy

Girl

Current year group of child: .....

**Name of parent/guardian:** .....

Address: .....

.....

Postcode: .....

Telephone: .....

Mobile: .....

Email: .....

Is there an older/younger sibling currently at St. Gabriel's school?

Yes

No

Name of child .....

Class .....

**If you would be applying on faith grounds** (Church of England/Churches Together in Britain & Ireland):

Name and address for current place of worship of parent/guardian:

.....

..... Tel. no: .....

Name of vicar/priest/minister/church officer: .....

Signature (parent/guardian): .....

Date: .....

**I no longer require a place for my child**

Please tick and return in the stamped addressed envelope

**Please note:** This is not an application form. However, details given will be used, alongside the admissions policy, in the event that a place becomes available. It is the responsibility of parents to contact school should these details change. All records of Parental Interest are reviewed and revised annually when parents can choose to retain or remove their child's details.