

Woodchurch Church of England Primary School
Supplementary Form

Name of child:

Surname

Christian names

Date of birth

Boy Girl

Name of parent/guardian

Address

Post code

Telephone Mobile

Place of worship one of parents / guardians regularly attends:

Name of place of worship

Address

Name of vicar / priest / minister / faith leader / church officer

Address

Postcode

Telephone

Worship attendance (TO BE COMPLETED BY THE CHURCH OFFICER):

I confirm that this applicant has attended a minimum of two Sunday services per month for at least two years prior to the closing date for applications. YES / NO

In the event that during the period specified for attendance at worship the church has been closed for.

Signed as confirmation (by incumbent or other church officer):

Name:

Position:

