

**Please complete this form**  
**if your child is under 4 years old and you wish to register them at the school**



**THE HOLY FAMILY CATHOLIC  
PRIMARY SCHOOL  
ONGAR HILL  
ADDLESTONE KT15 1BP**

**REGISTRATION FORM**

NAME OF CHILD:.....

NAME OF FATHER:.....

NAME OF MOTHER:.....

ADDRESS:.....

.....

.....POSTCODE.....

TELEPHONE NO:.....

DATE OF BIRTH:.....

YEAR OF ENTRY:.....

CHILD'S RELIGION:.....

NAME OF BROTHER OR SISTER ALREADY ATTENDING HOLY FAMILY SCHOOL

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