



CHRISTOPHER PICKERING PRIMARY SCHOOL ADMISSION FORM



Legal Surname:		Legal Forename:			
Preferred Surname:		Middle Name: (s)			
Date of Birth:		Gender: Male Female			
Home Address:		Mobile Tel No:			
Post Code:		Home Tel No:			
Email address					
Do you have internet access at home?		Yes/No (please delete as applicable)			
Name of Person(s) with Parental Responsibility: (1)		Relationship to child:		Address & Telephone Contact Details:	
Name of Person(s) with Parental Responsibility: (2)		Relationship to child:		Address & Telephone Contact Details:	
Any other Emergency Contacts: (1)		Relationship to child		Contact Number:	
Any other Emergency Contacts: (2)		Relationship to child		Contact Number:	
Medical Practice/Doctor's Name contact details;					
Medical Information:					
Does anyone in your child's immediate family (ie parent/carer, siblings) have a disability or long term physical or mental health problem: YES NO					
Ethnic Origin:		Home Language :		Religion:	
Pupil's First Language (<i>language spoken at home</i>)					
If you think your child is eligible for free school meals you can apply on line to get an instant decision: www.hullcc.gov.uk/freeschoolmeals					
Travel to and from school:	Walk	Car	Bus	Bicycle	Taxi
Previous school attended Name Address and Telephone number:					
Is your child a UK citizen?		YES		NO	
If NOT which country does your child hold a passport for?					
It is essential that you bring your child's birth certificate to the school office and, with your permission we would like to take a photocopy for our records.					
Birth certificate seen/copy taken (delete where applicable)		YES		NO	
I HAVE READ ALL THE INFORMATION FROM THE SCHOOL INDUCTION PACK AND HAVE TICKED THE RELEVANT BOXES ON THE CONSENTS AND AGREEMENTS FROM WHICH I HAVE RETURNED WITH THIS FORM.					
I UNDERSTAND THAT THE INFORMATION I HAVE PROVIDED WILL STAY ON FILE FOR THE DURATION OF MY CHILD'S ATTENDANCE AT CHRISTOPHER PICKERING PS AND THAT IT IS MY RESPONSIBILITY TO INFORM THE SCHOOL OF ANY CHANGES.					
PRINTED NAME _____			Signed _____		
(Parent/Carer)					