

## Bunscoil na mBráithre Críostaí

Christian Brothers Primary School, Green Street, Wexford

Tel./Fax: (053) 9141324. Email: office@cbsprimarywexford.com

School Enrolment Form				
Surname:	Child's PPSN:			
First Name(s)	Name(s) of Siblings atter	nding this school:		
Address:		13		
	Phone Number Home:			
	Phone Number Work:	Mum: Dad:		
Date of Birth:	Mobile No. Mum			
Nationality of Child:	Mobile No. Dad			
Date of Admission:	Other Contact Name:			
Class:	Other Contact Number:			
Father/Guardian:	Doctor's Name:			
Medical History / Conditions / Special Educational Needs:				
Email address:  Nationality of Parents/ Guardians:  Previous School:  Child's Religion:				
			YES	NO
Do you agree for your child to participate in RSE (Relationships & Sexuality) lessons? (Information available from the school)  Do you agree for your child to participate in STAY SAFE lessons? (Information available from the school)				
Do you agree to C.B.S. Primary School contacting your child's previous school to seek educational records?				
Does any legal order under family law exist that the school should know about?				
Parent's / Guardian's Signature: Date:				