



**REQUEST FOR
ADMISSION TO ST OSWALD'S CATHOLIC PRIMARY SCHOOL**

Parents/Guardians Names:

Address :

.....**Post Code**.....

Tel:No.

Child's Name

D.O.B.

Has your child been baptised: **Yes/No** **Date of Baptism**

If the answer is Yes - Where did the baptism take place.....

If the answer is No - Do you intend to have your child baptised? **Yes/No**

Signed **(Parents/Guardians)**

DATE