

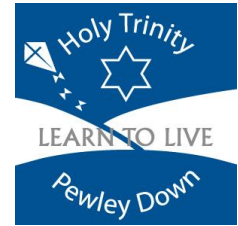
Office Use	Date Rec'd	Category of Priority	Details Checked	Year Group

HOLY TRINITY PEWLEY DOWN

A Federation of Holy Trinity Junior & Pewley Down Infant Schools

Holy Trinity (C of E Aided) Junior School, Guildford
SUPPLEMENTARY INFORMATION FORM

(to be completed in block capitals)



Child's Details:

Name of Child (surname first please) _____

Date of Birth _____

Address (including post code) _____

Telephone No. Home _____ Business _____ Mobile _____

Name of Parent or Guardian _____

Address (if different from above) _____

Present School _____

Address at time of entry to present school if different from above _____

Sibling:

If you have another child who will be attending Holy Trinity Junior or Pewley Down Infant School at the time of **entry**, please give details below.

Name _____ Class _____ Date of Birth _____ Date of Admission _____

Church School:

If you are applying on the basis of seeking a Church School for your child, please indicate below.

*I regularly attend Holy Trinity and/or St Mary's Church in Guildford.

*I regularly worship at _____ in _____.

A letter from your parish priest, church minister or equivalent to confirm active membership of your church should accompany this form.

Signature of Parent or Guardian _____ Dated _____

*Please complete and return to Holy Trinity School, Addison Road, Guildford, GU1 3QF.
Do not hesitate to contact the school office if you need any further information - telephone 01483 539033.*