 St Wilfrid’s Catholic Primary School

Toddler Group

Enrolment Form

|  |  |
| --- | --- |
| Childs Name | Date of Birth  |
| Child 1 |  |
| Child 2 |  |
| Address: |
| 1 Parent/Guardian Name: Telephone:2 Parent/Guardian Name: Telephone: |
| Preferred Email Address: |
| Alternative Emergency Contact 1: Telephone:Alternative Emergency Contact 1: Telephone: |
| Any siblings in School: Year Groups:  |
| Signed: Print Name:Date: |

