

Oxenhope Church of England (Voluntary Aided) Primary School

Supplementary Information Form – September 2021 Intake

Child's Full Name: _____

Date of Birth _____ Male/ Female

Address: _____

Postcode _____

Parent/Carer Name _____ Tel. No. _____

Do you regularly worship in an Anglican Church or any other Christian Church? **Yes / No**

Do you regularly worship as part of another faith community? **Yes / No**

Name and address of church or faith community: _____

Name of vicar/priest/minister/faith community leader: _____

Please ask the above named person to complete the section below:

Vicar/Priest/Minister/Faith Community Leader Recommendation

To the best of my knowledge the above child attends:

	Most weeks	Once a month	Occasionally	Never
Regular services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Other Involvement -----

To the best of my knowledge the above parent attends:

	Most weeks	Once a month	Occasionally	Never
Regular services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Other Involvement -----

Signed _____ Name (printed) _____

Date _____

This supplementary form should be completed and returned to Oxenhope C of E Primary School at the above address, if we are listed as one of your school choices on the Common Preference Form.