

## Enrolment Form

<b>Pupil Details</b>	
Name:	Details of any allergies/medical/behavioural difficulties: _____ _____
DOB:	Is your child attending any services? <ul style="list-style-type: none"> <li>Early intervention</li> <li>Play Therapy</li> <li>Other _____</li> </ul>
PPS No:	
Religion:	
Nationality:	_____
Address:	Previous School attended, Playschool, Montessori, etc, Primary (reason for transfer)
GP name and contact no:	Siblings planning to attend our School: Name and Year of enrolment: 1. _____ Year: _____ 2. _____ Year: _____ 3. _____ Year: _____
<b><u>Parent/Guardian/Emergency Contact Details</u></b>	
Mother's Name:	Father's Name:
Mobile No:	Mobile No:
Home No:	Home No:
Work No:	Work No:
Email:	Email:
Address:	Address:
<b>Additional Contact 1.</b>	<b>Additional Contact 2.</b>
Name:	Name:
Number:	Number:
Relationship to child:	Relationship to child:
Address:	Address:

Telephone 071 9637003  
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 Vimhir Rolla: 175710

St. Brigid's N.S.  
 Dangan  
 Kilmore  
 Carrick-On-Shannon  
 Co. Roscommon

<b>Other Relevant Information</b>	
<b>Signature Section</b>	
I/We understand that pupil details provided on this form will be included in the Primary Online Database.	Yes No
I/We give permission for my child's name, address, and phone numbers to be shared with the HSE for School Medical/Dental services, if requested.	Yes No
I/We have read and agree with the school rules and Code of Behaviour.	Yes No
I/We are aware our child will take part in RSE and Stay Safe programmes.	Yes No
I/We agree with the School's Healthy Eating Policy.	Yes No
I/We consent to our child attending school related activities outside school grounds.	
I/We consent to our child receiving treatment for minor accidents (cuts, grazes).	Yes No
I/We agree that our child will abide by the school rules.	Yes No
I/We grant permission for my child to access the internet for educational purposes. I understand that every reasonable precaution has been taken by the school to provide for online safety but the school cannot be held responsible if pupils access unsuitable websites.	Yes No
I/We give permission for our child to be named and/or photographed in newspaper for school related activities.	Yes No
I/We give consent for my child to use the Seesaw online portfolio app/website to save samples of their work.	Yes No
Signed: _____	Date: _____
Signed: _____	Date: _____

**Please attach Birth and Baptismal Certificates,  
 which will be copied for school records, and returned to you.**