Bollington St John's Primary Supplementary Information Form

Child's Details	
First Name	
Surname	
Date of Birth	

Parent/Carer Details	
Name of parent/carer	
Address	

Place of Worship	
Name of place of worship (one of parents/carers regularly attends)	
Address	
Name of church vicar or minister	
Phone number	
Email address	

Worship Attendance	
Please tick if you have attended a minimum of one service per month for at least six months prior to the closing date for applications as in criteria	
Church vicar or minister confirmation of worship attendance	
Name	
Signature	