



KILLAMARSH INFANT & NURSERY SCHOOL
43 Sheffield Road, Killamarsh, Sheffield S21 2DX

PLEASE COMPLETE IN BLOCK CAPITALS

FOR SCHOOL USE ONLY

Birth Certificate seen:
Date of Birth checked :
Name checked :
Date :

Forenames :	<i>Please underline the name by which the pupil is usually known</i>
Surname :	
Date of Birth :	
Names of brothers and sisters already in this school (if any) :	
Pupil's home address :	
Post Code :	
Home Tel. No :	

	Parents/Guardians at pupil's home address	
Relationship to pupil :	<u>e.g. Mother</u>	<u>e.g. Father</u>
Title :		
Forenames :		
Surname :		
Can be contacted in an emergency during day :	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
If yes, give whereabouts { e.g. home or name of workplace)		
Daytime ☎ :		
Mobile Number :		

	Additional Parental Contacts	
	<i>This is for parents who may not live at the home address, but have parental responsibility.</i>	
Relationship to pupil :		
Title :		
Forenames :		
Surname :		
Address:		
Post Code :		
Can be contacted in an emergency during day :	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Daytime ☎ :		
Mobile Number :		

EMERGENCY CONTACT LIST

Please list anyone other than yourself who may be contacted in an emergency or could collect your child from school.

Full Name : (in order of priority to call)	Relationship to child	Address	Post Code	☎ Telephone No Mobile No.
1				
2				
3				
4				
5				
6				

Ethnic Origin

Our ethnic background describes how we think of ourselves. This may be based on many things, including, for example, our skin colour, language, culture, ancestry or family history. **Ethnic background is not the same as nationality or country of birth.**

Please study the list below and tick one box only to indicate the ethnic background of the pupil.

Description	Code	Tick	Description	Code	Tick
White—British	WBRI		Any other Black background	BOTH	
White—Irish	WIRI		Indian	AIND	
White—traveller of Irish Heritage	WIRT		Pakistani	APKN	
White—Gypsy/Roma	WROM		Bangladeshi	ABAN	
White—any other background	WOTH		Any other Asian background	AOTH	
Chinese	CHNE		Mixed—White and Black Caribbean	MWBC	
Any other Ethnic background	OOETH		Mixed—White and Black African	MWBA	
Black—Caribbean	BCRB		Mixed—White and Asian	MWAS	
Black—African	BAFR		Any other Mixed background	MOTH	

Additional Information - Nationality & Language

Nationality : British English Irish Scottish Welsh Not Supplied

Language : English Other Language (please specify) :

Religious Affiliation

Christian Jewish No Religion Other Religion (please specify) :

Free School Meals	My child is eligible for free school meals and does have school dinners	Please tick : <input type="checkbox"/>
Please state whether your child is eligible for free school meals whether they actually take them or not.	My child is eligible for free school meals but brings a packed lunch.	Please tick : <input type="checkbox"/>

Usual Mode of Travel to School

Please tick only one of the following boxes :

Walk	<input type="checkbox"/>	Cycle	<input type="checkbox"/>
Car/Van	<input type="checkbox"/>	Public Service Bus	<input type="checkbox"/>
Car Share (with a child/children from a different household)	<input type="checkbox"/>	Dedicated School Bus	<input type="checkbox"/>
Taxi	<input type="checkbox"/>	Other	<input type="checkbox"/>

Parental Permission Slip

Killamarsh Infant and Nursery School

If, in the future, you wish to change any of the authorisations, please complete another permission form.

I **give/do not give** permission for my child to take part in local walking outings during school time.

I **give/do not give** permission for my child to be photographed or filmed individually or in groups where the photographs are to be displayed only within school or sent home for purchase.

Signed _____ (parent/guardian)

Date _____

Please note that this permission slip will be renewed annually.

I declare the information on this form to be correct to the best of my knowledge

Signed :(Parent/Guardian) Date :

The information on this form is processed electronically for administrative purposes and is subject to the terms of the Data Protection Act