



**St Richard's CE Primary School**  
Ashburnham Road, Ham, Richmond TW10 7NL  
Telephone: 020 8940 7911 Fax: 020 8332 0987  
Email: info@st-richards-st-andrew.richmond.sch.uk

## ADMISSION TO RECEPTION CLASS

# SUPPLEMENTARY INFORMATION FORM

Please complete this form if you are applying for a place under the church criteria and return it to the school by **15 January in the year that your child is due to start in Reception**. We will write to your Priest/minister to verify your attendance at church. Failure to complete and return this form will mean your application cannot be considered under the church criteria.

Child's Surname	
Child's First Name(s)	
	Boy / Girl

Date of Birth	Home Tel. No.	Mobile or other daytime tel. no.
---------------	---------------	----------------------------------

Name and Initials of Parents/Guardians	
--	--

Address
Post Code

--	--	--	--

Religion		Has your child been baptised?	Yes / No
Do you regularly attend Church?	Yes / No	If yes, please give name and address of Church you attend	

**Please note that you must also complete and return a Common Application Form, naming St Richard's as one of your preferences, to your home local authority's school admissions team by the closing-date of 15 January.**