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| **St Joseph’s Registration Form / Personal Detail Record** |
| Full Name of Child: | Sex: M / F |
| Date of Birth: | Birth Certificate Number: |
| Home Address:Post Code: |
| Number of Children in Family: | Child’s Position in Family: |
| Full Names of parents or guardians | Contact Telephone Number |
| * Father
 |  |
| * Mother
 |  |
| * Guardian
 |  |
| Parents address if different from above |
| Emergency Contact Number: (Name and relationship to child)Email Address:  |
| Name and Address of Family Doctor:Doctor’s Telephone Number: |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Immunisation Record***Please mark box to indicate if the child has had the vaccination.* |  | DPT (Diphtheria/Tetanus/Polio) 2 months |  | MMR 12 – 15 months |
|  | DPT (Diphtheria/Tetanus/Polio) 3 months |  | Polio / Tetanus Booster 3 - 5 yrs |
|  | DPT (Diphtheria/Tetanus/Polio) 4 months |  | Tetanus Booster 10 - 13 yrs |
|  | Meningitis C |  | Other |
|  |  |
| Infectious Illnesses |  |  | Chicken Pox |
| Allergies or medication  |  |
| Other relevant medical information |  |
| Any special home circumstances |  |
| Are there any foods/drinks that your child is unable to consume? |  |
| Home language(s) |  |
| Religion |  |
| Parish |  |
| Has the child been baptized? | Yes / No |
| Place of Baptism |  |
| Date of Baptism |  |
| Other relevant information |  |
| Signature of Parent/Guardian: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date |

*Personal information will be held and processed by the School for those purposes contained in the School’s Privacy Notice, and in accordance with the provisions of the General Data Protection Regulation (GDPR). Personal information provided may be shared with third parties as and when necessary in order to verify the information, for the prevention or detection of crime and/or for the purposes of discharging any statutory or administrative function as required by law.  For a copy of the Privacy Notice, contact school.*