*Merlin Woods Primary School*

Merlin Woods

PRIMARY SCHOOL

*Roll no: 20350P*

*Doughiska Road*

*Galway* *Phone No 091-761676*

**Expression of Interest Form**

***Please print all details clearly, Thank you.***

|  |  |  |  |
| --- | --- | --- | --- |
| **1.Child’s Name**  **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  **Male \_\_\_ Female \_\_\_** | | **2. Address**  **Eircode:** | |
| **3. Date of Birth** | |
| **4. Religion** | **5. Place of Baptism (if applicable):** |
| **6. Home phone** | **7. Mobile Phone** | **8. Email address** | |
| **9. Details of Father and/or Mother** | | | |
| **Parent/Guardian 1:**  **Any additional phone number:** | | **Parent/Guardian 2:**  **Any additional phone number:** | |
| **Names of brothers or sisters in this school (if any):** | | | |
| **Name and address of school or playschool previously attended:** | | | |
| **Seeking to enrol at Merlin Woods Primary School in September 2021 for \_\_\_\_\_\_\_\_\_\_\_\_ class.** | | | |
| PLEASE NOTE: This is neither an offer nor a guarantee of a place in Merlin Woods Primary School.  *I have read the above information and agree that this Application Form does not guarantee my child enrolment at Merlin Woods Primary School*  *Signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_* | | **Signature of Parent/Guardian:**  **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  **Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_** | |