St Finian's National School Early Start Pre School Enrolment Form

- **Name of Child:**_____
- **PPS No:** _____
- **Address:** _____

  _____
- **Date of Birth:**

  _____
- **Date/ Year of Entry:**

  _____
- **Phone Number:**

  _____
- **Email Address:**

  _____
- **Mother's Name:**

  _____
- **Father's Name:**

  _____
- **Emergency Contact Name and Phone Number:**

  _____

  _____
- **Please give any details of any brothers and sisters who go to St Finian's:**

  _____

  _____
- **Does your child suffer from any illnesses (for example Asthma/ Eczema)**

  _____

  _____
- **Have you attached copies of child's Birth Certificate?**

  Yes:___ No: ____
- **If you have a preference for a morning/ afternoon session please state**

  Morning 9:00 to 11:30 _____ Afternoon: 12:00 to 2:30 _____

Please note that this form is not an offer of a place. The information on this form is used to make sure that children are enrolled properly. This form will be kept until the child is ready to go to Junior Infants. Should your child attend St Finian's junior infants, the information on this form will be transferred onto the school computer system known as Aladdin. This form will be shredded when the child leaves Early Start. Until then all forms are kept locked in a cabinet in the Early Start room

Date received by office: _____