

STRICTLY CONFIDENTIAL

LYMM HIGH SCHOOL  
ADMISSION FORM

PUPIL INFORMATION

Legal Forename:	Legal Surname:	
Preferred Forename:	Preferred Surname:	
Middle Name(s):	Date of Birth:	Sex (m/f):
House Name/Number:		
Street:		
Town:		
County:		
Postcode:		

**DETAILS OF THOSE WITH PARENTAL RESPONSIBILITY** (needed to enable the school and education authority to meet their legal obligations)

**PARENTAL RESPONSIBILITY 1:**

Title (Mr/Mrs/Miss/Ms/Dr/Other):	Relationship:	
Name:		
Address:		
Mobile Telephone:	Home Telephone:	Work Telephone:

**PARENTAL RESPONSIBILITY 2:**

Title (Mr/Mrs/Miss/Ms/Dr/Other):	Relationship:	
Name:		
Address:		
Mobile Telephone:	Home Telephone:	Work Telephone:

**OTHER CHILDREN AT THIS SCHOOL:**

	Name	Date of Birth		Name	Date of Birth
1			3		
2			4		

**OTHERS HAVING PARENTAL RESPONSIBILITY** (includes unmarried fathers who have signed a legal agreement with the mother, or have a parental responsibility order from the courts, as well as step parents ONLY if they have a residence order from the court or have adopted the child)

Name:	Name:
Address:	Address:
Relationship to Child:	Relationship to Child:

**ARE THERE ANY COURT ORDERS IN FORCE RELATING TO THIS CHILD? YES/NO**

**PLEASE COMPLETE THE REVERSE SIDE OF THIS FORM**

**OTHER EMERGENCY CONTACTS IN CASE OF ILLNESS** e.g. relation/neighbour/friend, in order of preference

EMERGENCY CONTACT 1	EMERGENCY CONTACT 2
Name:	Name:
Address:	Address:
Relationship to child:	Relationship to child:

**MEDICAL INFORMATION**

Doctors Name:	Telephone Number:
Practice Address:	

Does your child have any medical conditions of which the school should be aware? YES/NO  
 If yes, please give details or write a separate letter addressed to the Head of Year.

**ETHNIC BACKGROUND**

Any other Asian background	
Any other Black background	
Any other ethnic group	
Any other mixed background	
Any other White background	
Bangladeshi	
Black - African	
Black - Caribbean	
Chinese	
Gypsy	
Gypsy/Roma	
Indian	
Other Gypsy/Roma	
Pakistani	
Roma	
Traveller of Irish heritage	
White - British	
White - Irish	
White and Asian	
White and Black African	
White and Black Caribbean	
I do not wish an ethnic background to be recorded	

**FIRST LANGUAGE**

Bengali	
Cantonese	
English	
Greek	
Gudjurathi	
Hindi	
Italian	
Punjabi	
Portugese	
Spanish	
Turkish	
Urdu	
Other	

**RELIGIOUS AFFILIATION**

Buddist	
Christian	
Hindu	
Jewish	
Muslim	
No Religion	
Other Religion	
Roman Catholic	
Sikh	

**NATIONALITY:** \_\_\_\_\_

**COUNTRY OF BIRTH:** \_\_\_\_\_

**LUNCH ARRANGEMENTS**

Free school meal	<p><b>Does your child have any allergies we should be aware of, e.g. nut allergy? YES/NO</b>                  If yes, details:</p>
Sandwiches/Packed lunch	
School meal	

**TRAVEL ARRANGEMENTS**

Public bus	
Car/Van	
Cycle	
Dedicated School bus	
Walk	
Taxi	
Other	

**PREVIOUS SCHOOL ATTENDED:** \_\_\_\_\_

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