DIOCESE OF CHESTER WITTON CHURCH WALK CHURCH OF ENGLAND AIDED SCHOOL

Supplementary form – School Admission 2017-2018

Name of child:		
Surname	Christian	
	names	
Date of birth	Воу	Girl
Name of parent/guardian		
Address		
Post code		
Telephone	Mobile	
	ents / guardians regularly attends:	
Name of place of		
worship		
Address		
Name of vicar / priest / minis	ster / faith leader / church	
officer		
Address		
Post code	Telephone	
Worship attendance:		
	ided, on average, a minimum of or e for applications as in criteria 2	
Signed as proof of attendand	ce (incumbent or other church offic	cer):

Your faith leader will be contacted in order to confirm this information