Child's Surname	First Name	Date of Birth
Child's Home Address		

Postcode		Home Telephone Number	

Evidence must be provided for ALL change of pupil's home address: Acceptable proof includes a council tax/gas/electric/water bill posted to home address or HM Revenues & Customs letter dated within the last 3 months confirming receipt of Child Benefit.

If you wish for two parents/carers to be Priority 1 contacts, please indicate below. If you want us to have more than two persons contact details for your child, please complete an additional form and number accordingly.
Only a parent or guardian can give permission for somebody other than themselves, to collect their child from school.

Mother **Father** **Guardian** **Other Relationship to child** _____

Mr / Mrs / Ms / Miss		**PRIORITY 1** **This contact must have parental responsibility, and access to their phone during the school day so they respond to an emergency. He/she will receive all school texts and emails.**
First Name		Surname
Address:		
Contact Telephone Number:		**Must be contactable during the school day**
Work Place Telephone Number (if applicable):		
Email		

Mother **Father** **Guardian** **Other Relationship to Child** _____

Mr / Mrs / Ms / Miss		**Priority Number** ..... **Only priority 1 contacts will receive school texts and emails. Other contacts are only used in an emergency to assist us in contacting a parent.**
First Name		Surname
Address:		
Contact Telephone Number:		**Must be contactable during the school day**
Work Place Telephone Number (if applicable):		
Email		

I give permission for my email address & mobile number to be used to receive information from school.

I have read and understood the above; I will notify the school if any telephone numbers change.

I confirm that I have sought the agreement of each of the above named individuals to be named as an emergency contact for my child and their consent before sharing their personal data for this purpose.

SIGNED _____ Parent /Guardian Date _____

Please complete an additional form if you have additional contacts you may wish us to have for your child,