

Admission Form

Ysgol Gynradd Gymunedol Aberaeron

Maes yr Heli

Aberaeron

Ceredigion

SA46 0BQ

Ffon/Tel. 01545570313

www.ysgolgyraddaberaeron.cymru

swyddfa@ysgolgyraddaberaeron.ceredgion.sch.uk



Details of Child

Surname of child:	
Forenames:	Sex (male or female):
Date of Birth:	Tystysgrif geni wedi ei weld: Yes / No
Year Group:	Class or Form:
Address:	
Postcode:	e-mail:
Telephone Number:	Name of previous schools (if any):
Position of child in family (please circle): 1 2 3 4 5	

Admission number (Office use only):	Admission date:
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Details of Parents

Name of Persons with whom the child lives	Relationship to child	Parental Responsibility	Telephone Number

When the child lives with someone other than his or her parent(s), the schools needs details of those persons who have parental responsibility. This is always the natural mother and, where the parents were married at the time the child was born, the natural father also retains parental responsibility.

Name of others with Parental Responsibility	Relationship to Child	Address	Telephone number

If parents are separated or divorced, has a court order been issued?	Yes / No
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Additional Contact Telephone Numbers

Name:	Telephone Number:
Name:	Telephone Number:
Name:	Telephone Number:
Name:	Telephone Number:
Family G.P.Name:	
Surgery Address:	
Medical condition of child (including details of regular medication and dietary requirements):	

Has a statement of special educational needs been issued in respect of your child? Yes/No					
Does your child wear glasses?				Yes/No	
Type of meal required:	School Meal	Sandwich	Free Meal		
Travel information:	School Coach	Public Transport	Bicycle	Walk	Car

I confirm that I give permission for my child's photograph and video to be taken and used as part of the school's record and presentations, school website and school's Twitter account – according to the Child Protection Guidelines.

_____ Parent/Guardian

For a variety of reasons, it is often necessary for pupils to be observed as individuals, within groups, or as part of the class. I give permission for schools staff, specialists from the authority, students and visiting teachers to observe my child and to undertake activities which have been carefully discussed and agreed beforehand with the schools / class teacher.

_____ Parent/Guardian

I give permission for my child to partake in swimming lessons at the Swimming Pool, Aberaeron Leisure Centre

_____ Parent/Guardian

Teachers make the most of the school's excellent location whenever possible and therefore occasionally take children on visits around the town. I give permission for my child to take part in any supervised visits involving leaving the school grounds e.g. going to the woodland, the beach, the town, the harbour or the park.

_____ Parent/Guardian

Any additional information about your child that could help us provide him/her with the best support possible in our school.

The information I have entered is correct to the best of my knowledge and belief.

Signed:	Name in BLOCK capitals:	Date:
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Thank you for your cooperation. Please keep us informed about any changes.

