



For Office Use Only
Date form received:

Receipt number: _____
September 2017

*Our Lady's Grove Primary School,
Goatstown Road, Dublin 14.*

Receipt number: _____
September 2017

Pre - Enrolment Form - Junior Infants 2018/2019

When completing, please print clearly and please tick the boxes where appropriate.

Child's First Name: _____ Child's Surname: _____

Boy Girl Date of Birth: ___ / ___ / _____ Religion: _____

Home Address: _____

E-mail:

Mother's First Name: _____ Surname: _____

Signature: _____ Mother's Mob: _____

Father's First Name: _____ Surname: _____

Signature: _____ Father's Mob: _____

If your child has special needs, please specify your child's needs:

I have read the Enrolment Policy (*available on our website at: www.ourladysgrove.ie*)

(Please tick **one box only** to indicate what category you are in.)

Category A: Sibling/s: _____

Category B:

Category C:

Category D:

Category E:

Category F:

Category G: