



Additional Contact (Priority 3)

Person(s) to be contacted if you are unavailable – please continue on a separate sheet if necessary.

(Relationship to Child should be shown as Aunt / Grandparent / Neighbour etc.)

Surname (Mr / Mrs / Ms / Miss)	Forename
Relationship to Child (Parent / Carer / Step Parent / Foster Parent)	
Address	
Daytime Telephone Number	Mobile Number

Medical Information / Medication details

Name of Doctor	Telephone Number
Address	
Medical conditions/ Medication the school should be aware of	

Image Rights

Please confirm agreement for your son/daughter’s image/name to be used by the school for promotion and publicity purposes.
 This includes a whole range of medium – school/college prospectuses, newspapers, school website, school newsletter, television etc. However, your son/daughter will be included on any year group photographs taken, which will not be used for publicity or promotion outside school. We will not ask Parents/Carers for their permission again, therefore, if you do have a change of mind in the future, could you please inform the school via a letter or telephone call.
 Please only tick the box if you are not happy for your child’s details to be used for this purpose.

Ethnic Information – Please study the list below and tick one box to indicate your child’s ethnic origin

English	White & Asian	Polish	Indian
Polish	Indian	Traveller	Pakistani
Traveller	Pakistani	White & Black Caribbean	Caribbean
White & Black African	African	If any other ethnic background applies please state:	

If you do not wish an ethnic category to be recorded, please tick the box

Language details – please state

First Language (spoken at home)	Second Language (if applicable)
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Religion

Christian	Buddhist	Hindu	Jewish
Muslim	Sikh	No religion	Other religion

If you do not wish a religion category to be recorded, please tick the box

Nationality & Country of Birth

Which country was your child born in?	What is your child’s nationality?
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The student information provided on this form is correct. I/We will inform the school immediately of any changes to my child’s contact details.

Signature (Parent / Carer): _____ Date: _____