

Wheelock Primary School



Pupil Registration Form 2025/2026

Details of Child

First name(s) Surname

Year Group Date of Birth Male / Female (Please circle)

Home Address

..... Post Code

Previous School (If Applicable)

Nursery/Pre-School Attended (If Applicable)

Please name any other brothers or sisters that currently attend the school, along with class/year

1. 2.

3. 4.

Details of Parents (named on the Birth Certificate)

Mother: Mrs / Miss / Ms / Dr

Address (if different from the child)

..... Post Code

Telephone (Home) Mobile Work

Email Address

Father: Mr / Dr

Address (if different from the child)

..... Post Code

Telephone (Home) Mobile Work

Email Address

Contact Information

	First Contact	Second Contact	Third Contact
Name			
Relationship to Child			
Home			
Mobile			
Work			

Details of other adults with parental responsibility (not named on the birth certificate) – Please provide evidence of parental responsibility

Name **Relationship to Child**

Address

..... **Post Code**

Telephone (Home) **Mobile** **Work**

Name **Relationship to Child**

Address

..... **Post Code**

Telephone (Home) **Mobile** **Work**

Medical Information

Name of Doctor **Telephone Number**

Doctor's Surgery

Does your child have any long term medical conditions that we should be aware of?

.....

.....

May your child be given a plaster? (Please circle) YES / NO

Dietary Needs or Food Allergies/Intolerances

Please provide details of any dietary requirements, food allergies or intolerances that your child has

.....

.....

Please state any medical allergies your child may have

.....

.....

SEN and Disabilities

Does your child have any special education needs or disabilities the school should be aware of? Please give details

.....

.....

Ethnic Origin

How would you describe your child's ethnic origin?

.....

Languages

What is your child's first language?

Please state any other languages spoken at home

.....

Religion

What is your child's religion? (If applicable)

Forces Children

Please indicate if any parent is in the forces **YES / NO (Please circle)**

Meal Arrangements

Please tick the most frequent meal arrangement for your child

☐ Free School Meal

☐ School Meal

☐ Packed Lunch

Travel Arrangements

Please tick the most frequent travel arrangement for your child

☐ Car

☐ Walk

☐ Public Transport (Bus, Train etc.)

Communication

Wheelock Primary School uses an electronic communication system to enable parents / carers to receive information quickly and reliably. This includes sending letters by e-mail and text messages to your mobile phone. We will not routinely send home paper copies of letters but they can be collected from the stand in the front entrance.

Please provide e-mail addresses for the parent(s) who wish to receive e-mail communications from school.

Parent 1 email: Parent 2 email:

Please provide the mobile phone number of one parent wishing to receive text message communications from school.

Mobile phone number:

Photographs and Publicity

I give permission for my child's photograph to be used on the school website

☐ Yes ☐ No

I give permission for my child's photograph to be used on the school Twitter account

☐ Yes ☐ No

I give permission for my child's photograph to be used for publicity in the local newspapers

☐ Yes ☐ No

Other Information

Is there any other information about your child that the school should be aware of?

.....
.....

Birth Certificate

In order to register your child, we need to see their original birth certificate. Please bring this in to the school office where it will be used to verify the information on this registration form then returned. **With your permission, a copy will be taken for our records.**

Office Purposes Only

Birth Certificate checked by:(name)(date)

Copy of certificate taken: yes / no Serial Number:

Signature (Parent/Guardian)

Signed Date