

# Dilton Marsh Church of England Primary School

## Student Registration Record

Dilton Marsh Church of England School has a duty to protect personal information belonging to the public who it serves. Dilton Marsh is notified under the Data Protection Act 1998 and is committed to all its principals and adheres to the 'Best Practice' in information security. This information will be shared (under statutory requirement) with Local Education Authorities and the DFE for statistical analysis.

### Pupils Details

Legal Surname ..... Legal Forename .....

Middle Name(s) ..... Is this child Male or Female?

Preferred Forename ..... Preferred Surname .....

Your child's legal names appear on their Birth Certificate or Passport and whilst we must have a record of them, your child can use a "preferred" name at school. If your child's name has been changed through adoption or by Deed Poll, we may need to ask to see evidence of this.

Address ..... Postcode.....

Date of Birth ..... Ethnic Background .....

Nationality ..... First Language .....

### Parents/Guardians Details

Please provide details of both parents. Where a parent does not live in the same household as their son, or daughter, will usually provide copies of school reports if contact details are provided.

Mother: Mrs, Miss, Ms: First Name ..... Surname.....

Address ..... Postcode.....

Telephone Numbers: Home ..... Work .....

Mobile ..... Email Address.....

Occupation ..... Place of Work.....

Is this person a serving member of HM Forces? Yes/No      Is this person disabled? Yes/No

Does this person require help with communication because of a disability (eg deafness or sight impaired), or because of language issues?

Yes/No ..... (**please give details**)

Father: Mr/Other: .....First Name ..... Surname .....

Address ..... Postcode.....

Telephone Numbers: Home ..... Work .....

Mobile ..... Email Address.....

Occupation ..... Place of Work .....

Is this person a serving member of HM Forces? Yes/No      Is this person disabled? Yes/No

Does this person require help with communication because of a disability (eg deafness or sight impaired), or because of language issues?

Yes/No .....(please give details)

**Other Contacts**

*Please give details of at least one other adult who may be contacted, in an emergency, if the school cannot contact either parent. This person may be another family member, or a reliable friend or neighbour.*

Mr/Mrs/Miss/Ms: ..... First Name ..... Surname .....

Relationship to Student .....

Address .....

..... Postcode.....

Tele. No: Home ..... Work ..... Mobile .....

Work Address: .....

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Mr/Mrs/Miss/Ms: ..... First Name ..... Surname .....

Relationship to Student .....

Address .....

..... Postcode.....

Tele. No: Home ..... Work ..... Mobile .....

Work Address: .....

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Mr/Mrs/Miss/Ms: ..... First Name ..... Surname .....

Relationship to Student .....

Address .....

..... Postcode.....

Tele. No: Home ..... Work ..... Mobile .....

Work Address: .....

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**Signature of Parent or Guardian** ..... **Date** .....

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*Thank you for completing this information. Please would you help us by letting us know if any details need to be changed.*