

Ysgol Hen Heol / Old Road School

GENERAL INFORMATION – UPDATE 2016-2017

Child's Name:	DOB:
Address:	Allergies/Medical needs:
Parent's name: Telephone number: Mobile:	Name of doctor Surgery address/number
Parent's name: Telephone number: Mobile	Address of parent if different from above
1. Person to contact in an emergency – other than parent Name: Landline: Mobile:	Consent for local visits: (Please tick) I give consent I do not give consent
2. Person to contact in an emergency – other than parent Name: Landline: Mobile:	Any other relevant information
Main person(s) collecting your child from school: Password:	Name(s)
I am / I am not on Facebook	Religion:
Parent's Signature	Date