



Scoil Chríost Rí

Cloughleigh Road, Ennis, Co Clare, V95YD26
Tel: 065 6820105 Email: secretary.criostri@gmail.com

Expression of Interest Form 2023/2024

This form should be completed by parents/guardians seeking to enrol their child in Scoil Chríost Rí and returned to the school secretary.

Pupil Details

First Name _____ **Surname** _____
Date of Birth _____ **Gender (tick)** Male ____ Female ____

Address at which pupil normally resides

(Please refer to Enrolment Policy in relation to Proof of Address)

Entry Class

Junior Infants	<input type="checkbox"/>	Third Class	<input type="checkbox"/>
Senior Infants	<input type="checkbox"/>	Fourth Class	<input type="checkbox"/>
First Class	<input type="checkbox"/>	Fifth Class	<input type="checkbox"/>
Second Class	<input type="checkbox"/>	Sixth Class	<input type="checkbox"/>

Sibling(s) currently enrolled in Scoil Chríost Rí

Name	Class
_____	_____
_____	_____
_____	_____
_____	_____

*Please fill out both sides of this form

Parent(s)/Guardian(s) Details

Name: _____

Relationship to child: (tick as appropriate) Parent ___ Legal Guardian ___ Custodian ___

Address: _____

Home Tel: _____ Mobile: _____

Signature: _____ Date: _____

Name: _____

Relationship to child: (tick as appropriate) Parent ___ Legal Guardian ___ Custodian ___

Address: _____

Home Tel: _____ Mobile: _____

Signature: _____ Date: _____