



'Together in God's Love: aim high, stay strong, be determined.'

St. David Haigh & Aspull C of E Primary School

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Supplementary Information Form 2024-25

CHILD INFORMATION

Surname:.....Forename(s):.....

Date of birth:

Name of Parent/Guardian:

Address:

Postcode: Telephone:

Email:

THIS SECTION TO BE COMPLETED AND SIGNED BY THE VICAR/PRIEST/MINISTER/FAITH LEADER

PLACE OF WORSHIP:

Address: Postcode:

Name of Vicar/Priest/Minister:

Address: Postcode:

Telephone:

PUBLIC WORSHIP ATTENDANCE

I confirm that the above-named child and an immediate adult member of family (parent, grandparent, primary carer) has attended public worship at least eight times in the twelve months prior to the date of application. (please tick one)

- Regular attendance at any Christian church
- Regular attendance of any other religious faith

Name:

Signed: Date:

In the event that during the period specified for attendance at worship the church or, in relation to those of other faiths, relevant place of worship, has been closed for public worship and has not provided alternative premises for that worship, the requirements of these admissions arrangements in relation to attendance will only apply to the period when the church, or in relation to those of other faiths, relevant place of worship, or alternative premises have been available for public worship.

