

ST. MARY'S CATHOLIC PRIMARY & NURSERY SCHOOL

CHANGE OF CONTACT DETAILS

Child's Name _____

Previous Address _____

_____ **Post Code** _____

Home Telephone No. _____

NEW ADDRESS **As from** _____

Address _____

_____ **Post Code** _____

New Home Telephone No. _____

NEW CONTACT DETAILS

Name _____ **Relationship to Child**

New Contact Place

Telephone Number _____

New Mobile Number. _____

Signed _____ **Parent/Carer**

Date _____