Lara Group for **Education**

(Kindergarten, Primary School, Language Centre)



Primary application form

Child's first name:		
Child's family name:		
Child's date of birth:	Day (), Month (), Year ()
1. Name of person co have parental response		The person completing this form must
Title:	First Name:	Family Name:
2. Relationship to Child:		
3. The current address at which the child lives must be the address where the child		
resides for most of the week with his/her parent or carer. Where the child has a		
joint address, the address where the child benefit is paid will be taken as the		
child's address.	ddress where the em	nd benefit is pard will be taken as the
Home Number:		Work Number:
Email Address:		Mobile Number:
4. Are you a member of staff at any school for which you are applying? Yes / No		
5. I agree to the sharing of the information given within this application so that it		
can be processed efficiently and confirm that I have read the attached notes and		
that the details I have given are correct.		
Signature:		Date: