



Intention to Enroll Application Form Lisvernane N.S. 2021/2022



Pupil's First Name: _____ Surname: _____

Date of Birth: _____ Gender: _____

Address (at which the applicant resides): _____

Name and class of Sibling(s) currently enrolled: _____

Parish in which the applicant resides _____

Parent(s)/Guardian(s) Details:

Name: _____ [] Parent [] Custodian [] Legal Guardian

Address: _____

Home Tel. _____ Mobile _____ Email. _____

Name: _____ [] Parent [] Custodian [] Legal Guardian

Address: _____

Home Tel. _____ Mobile _____ Email. _____

Signature 1: _____ Signature 2: _____

Date: _____ Date: _____

Completed enrolment applications (or a photograph of the completed form will suffice) must be returned to lisvernans479@gmail.com or posted to Principal, Lisvernane N.S., Lisvernane, Aherlow, Co.Tipperary no later than 17th February 2021.