

Junior Infants Pre-enrolment Form

THIS FORM IS FOR 2021 ONLY



Information on child to be pre-enrolled:

Child's First Name: _____

Child's Surname: _____

Date of Birth: DD / MM / YY

Sibling in the school: _____ (please name)

Please note: Children have to be 4 by June 1st for entry to Junior Infant Class.

Parent(s) / Guardian(s) Information:

First Name(s): _____ Surname: _____

Address: _____

Mobile Number: _____

E-mail: _____

First Name(s): _____ Surname: _____

Address: _____

Mobile Number: _____

E-mail: _____

Please note the following:

- I understand that the receipt of a pre-enrolment form does not guarantee that the child will be offered a place.
- I understand that it is my responsibility to inform Canal Way ETNS of any change of address, telephone number, or other relevant circumstances.
- I understand that, should the school be in a position to offer my child a place, I have 14 days to respond otherwise I will have forfeited my child's place on the pre-enrolment list
- Please contact enrolment@canalwayetns.org with any queries.
- Please return form (one for each child) to enrolment@canalwayetns.org
- All forms received will be acknowledged by email. If you have not received an acknowledgement within one week please contact enrolment@canalwayetns.org