



# ST MARY ABBOTS SCHOOL RECEPTION ENTRY - CLERGY FORM



**IF YOU HAVE APPLIED FOR A FOUNDATION PLACE, you must fill in this section:**

Name of Child: ..... Child's Date of Birth .....

What is the name and address of church where you currently worship? .....

When did you start attending this church? .....

How frequently do you attend Sunday services in this church? .....

Name of the church's priest or minister .....  
**(We require him/her to fill in the form below)**

**If within the last three years you used to worship regularly at another church, please also give the following details:**

Name and address of church you used to attend .....

When did you start attending this church? .....

How frequently did you attend Sunday services in this church? .....

Name and address of priest or minister .....  
**(you must arrange for him/her to fill in the form below)**

Your signature ..... Date.....

## PRIEST'S/MINISTER'S REFERENCE

*The family above has applied for a Foundation Place for their child/ren at St Mary Abbots VA Church of England School. Awarding such places depend on our receiving their Priest's/Minister's assurance that they do attend regularly and have done over a given period. The school's Admissions Criteria are included in the Application Pack. Kindly fill in the following details:*

Your Church's Name: .....

Your Church's Address: .....

Your Church's Denomination .....

Is your church a member of Churches Together in Britain and Ireland: [ ] yes [ ] no

When did this family start attending regularly (month/year) .....

**Since January 2017, how frequently on average has this family attended Sunday worship with you:**  
One Sunday a month [ ]; Two Sundays a month [ ]; Three Sundays a month [ ]; Four Sundays a month [ ]

Your phone number ..... Email .....

Your signature ..... Date .....

## PREVIOUS CHURCH'S PRIEST'S/MINISTER'S REFERENCE (where applicable)

*The family above tell us that in the last three years they used to worship with you regularly before moving to their present church. To enable us to take into account their commitment with you, kindly fill in the form below:*

Your Church's Name: .....

Your Church's Address: .....

Your Church's Denomination .....

Is your church a member of Churches Together in Britain and Ireland: [ ] yes [ ] no

When did this family start attending regularly (month/year) .....

When did they move away (month/year) .....

**During this period, how frequently on average did this family attend Sunday worship with you:**  
One Sunday a month [ ]; Two Sundays a month [ ]; Three Sundays a month [ ]; Four Sundays a month [ ]

Your phone number ..... Email .....

Your signature ..... Date .....