

OATLANDS BEFORE/AFTER SCHOOL EXPRESSION OF INTEREST FORM

Date Received _____

Name of Child: _____

Date of Birth: _____ Gender: MALE _____ FEMALE _____

Home Address:

Parents Country of Origin: _____

Main E-mail Address _____

Parent 1 Name & Mobile Number: _____

Parent 2 Name & Mobile Number: _____

Home Phone Number: _____

Child's Class September 2022 (Please Circle):

Junior Infants Senior Infants 1st Class 2nd Class 3rd Class

4th Class 5th Class 6th Class

Any Important Information we should know about your child:

PLEASE CIRCLE THE SESSION/S & DAYS REQUIRED.

BEFORE SCHOOL 7.50 – 8.50AM

MON TUES WEDS THURS FRI

AFTER SCHOOL 13.30 – 14.30 (JI &SI) 13.30 – 18.15(JI &SI) 14.30-18.15 (1ST-6TH)

MON TUES WEDS THURS FRI

*We will contact you as soon as possible if a place becomes available.
Thank you.*