

St. Augustine's National School

Kilshanny, Co. Clare.

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APPENDIX 1: ENROLMENT APPLICATION FORM: YEAR 2026/2027

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. _____

Email address for correspondence: _____

Signature 1: _____ Signature 2: _____

Date: _____ Date: _____

Completed enrolment applications must be returned to St. Augustines National School
no later than 3pm on 27th February 2026.