

# Mainstream Enrolment Application Form (Junior Infants)

St. Conaire's NS for 2026/2027 School Year

Pupil's First Name: \_\_\_\_\_ Surname: \_\_\_\_\_

(Name must be as on birth cert.)

Date of Birth: \_\_\_\_\_ Gender: \_\_\_\_\_

Address (at which the applicant resides – please include eircode):

\_\_\_\_\_

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 along with a copy of the birth certificate must be returned to **St. Conaire's NS, Tullyvarraga Road, Shannon, Co. Clare V14 X272** no later than **January 23<sup>rd</sup>, 2026**