



12. Address where Pupil will reside if different from above

13. Position Sought (please tick as appropriate):

Day [] Day Boarder [] 5-Day Boarder [] 7-Day Boarder []

14. Emergency Contact (other than Parents/Guardians listed above):

Full Name

Phone Number (s)

15. Relatives now and/or previously at Middleton College:

Name Relationship Year

Name Relationship Year

Name Relationship Year

Name Relationship Year

16. Any other information you feel may be relevant to this application

DECLARATION:

I WISH THE NAMED CANDIDATE TO BE CONSIDERED FOR ADMISSION

(i) Signature of Parent/Guardian Date

(ii) Signature of Parent/Guardian Date

PLEASE NOTE

A. A copy of the candidate's Birth Certificate and most School Report must be furnished with this Application Form along with the Non-Refundable Registration Fee of €400.

B. Candidates will be reviewed for acceptance on an individual basis and parents will be informed accordingly.

FOR OFFICIAL USE ONLY

Birth Cert received Registration Fee paid School Report received