



# CHRIST THE KING CATHOLIC PRIMARY SCHOOL

*We love, aspire and serve with Christ our King*

## DRAFT

### RECEPTION ADMISSIONS SUPPLEMENTARY FAITH FORM 2027

This form should normally be completed by the same parent/carer who has completed the home local authority application form and then emailed along with any evidence to [intake2026@ctkliverpool.co.uk](mailto:intake2026@ctkliverpool.co.uk) by 4pm on 15th January 2026.

Name of school applied for:	Christ the King Catholic Primary School
Full Name of Child:	
Address of Child:	
Postcode:	

Is your child:

Baptised Roman Catholic  
 Baptised Christian - please state denomination: \_\_\_\_\_  
 A member of another Faith - please state faith: \_\_\_\_\_

Catholic Parish of Child's Residence *	
* Please use <a href="https://rcaol-schools-finder.cocreatedev.co.uk">https://rcaol-schools-finder.cocreatedev.co.uk</a> to check which Parish your child resides in and give full details. Eg. Parish of Christ the King & Our Lady (the part of the parish formerly referred to as Christ the King).	

#### Evidence of Roman Catholic Baptism

Proof of baptism in the form of a Baptism Certificate is required. If you do not have a Baptism Certificate please contact the Parish office where your child was baptised to obtain a copy. This should be emailed to [intake2027@ctkliverpool.co.uk](mailto:intake2027@ctkliverpool.co.uk) by 4pm on 15th January 2027.

#### Evidence of Faith Group membership

If your child is to be considered under the relevant criterion as other than Catholic Christian proof of Baptism in the form of a Baptismal Certificate or confirmation in writing by completing the statement below to show that your child is a member of a faith community by an appropriate Minister of Religion is required. If you belong to a faith other than the Christian faith an appropriate faith leader would need to confirm in writing by completing the statement below that your child is a member of their faith group.

Completed by Minister of Religion/Faith Leader

Minister / Leader Name:	
Position held:	
Address:	
Postcode:	
Contact Number:	
Signed:	
Dated:	

#### Parent / Carer Declaration

I am the parent/have parental responsibility for the child named. I confirm that the information provided on this form is accurate. I am aware that any place offered due to false information being provided may be withdrawn.

Signed:		Name:	
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Relationship to child:

Date: