



Scoil Réalta na Maidine
Upper Church Street, Listowel, Co. Kerry
Telephone: 068 21994
Email: info@scoilrealta.ie
Web: www.scoilrealta.ie

ENROLMENT APPLICATION FORM

Pupil's First Name: _____ Surname: _____

Date of Birth: _____ Gender: _____

Address (at which the applicant resides): _____

_____ Eircode: _____

Name and Class of Sibling(s) currently enrolled: _____

Parish in which the applicant resides: _____

Parent(s)/Guardian(s) Details:

Name: _____ [] Parent [] Legal Guardian

Address: _____

Telephone: _____

Name: _____ [] Parent [] Legal Guardian

Address: _____

Telephone: _____

Signature 1: _____ Signature 2: _____

Date: _____ Date: _____

Completed enrolment applications must be returned to Scoil Réalta na Maidine, Church Street, Listowel no later than end of February.