

2 Ballyblack Road, Newtownards, BT23 8SR

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Religious Affiliation Form

Child's name:				_ D.o.B:	/	_/
Perceived community background (Please circle):						
Mother/Guardian:	Protestant	Catholic	Other			
Father/Guardian:	Protestant	Catholic	Other			
Child:	Protestant	Catholic	Other			
Name(s) of Parent(s)/Guardian(s):						
Email contact:						
Contact Telephone number:						

The information you provide on this form will be used in the application of the school's Admissions Criteria.