



Milford Grange National School

Enrolment Application Form

Junior Infants 2027

Return to Principal, Milford Grange National School, Castletroy, Limerick

Pupil's First Name: _____ Surname: _____

Date of Birth: _____ Gender: _____

Address (at which the applicant resides): _____

Please select the category the applicant is applying under

- ☐ Category 1 Brothers and sisters of children enrolled in Milford Grange National School.
- ☐ Category 2 Children living (principal place of residence) within the Parish of Milford
- ☐ Category 3 Children of Permanent members of staff in Milford Grange National School.
- ☐ Category 4 Children of parents working in parish of Milford
- ☐ Category 4 Children of parents living (principal place of residence) in adjacent parish
- ☐ Category 4 Children of Milford Grange N.S. past-pupils
Please indicate years as a pupil in Milford Grange NS _____
- ☐ Category 5 All other applications.

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 must be returned to **Milford Grange N.S., Castletroy, Co. Limerick**
by 2pm, Monday 11th January 2027.*