



West End Academy

Regent Street, Hemsworth
Pontefract WF9 4QJ

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www.west-endacademy.org

Headteacher: Chris Johnson

Friday 5th September 2025

Dear Parent/Carer,

We are updating our records and request that this form is completed and handed back to school ASAP. This must be brought back to school by **Friday 12th September 2025** to ensure our records are kept up to date.

Child's Name: Class:

Address:
.....

Parent/Carer: Telephone number:

Emergency contact details:

Medical / Personal Information

Does your child: (please give further details if necessary)

- need glasses? Yes ☐ No ☐
- have any hearing problems? Yes ☐ No ☐
- have asthma? Yes ☐ No ☐
- have any allergies? Yes ☐ No ☐
- have any other medical issues? Yes ☐ No ☐
- need any medication in school? Yes ☐ No ☐
- have any religious routines? Yes ☐ No ☐

Are there any child custody issues? If yes, please give details (continue overleaf if necessary):
.....

What is your child's: Ethnicity: Religion:

Is English your child's first language? If not, please advise

Signed: Parent/Carer Date:

Thank you for your support,

Mr C Johnson
Headteacher



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