



PRIMARY CONTACT FORM

To act as the main point of contact on behalf of parents for all school communication throughout the pupil's enrolment at Sedbergh.

Pupils Full Name:

PRIMARY CONTACT

Title: Mr/Mrs/Ms/etc.....

Name (in full):.....

Email Address:.....

Relationship with Family:

Address:.....

.....

..... Post Code:.....

Telephone Numbers. Day:..... Evening:.....

Mobile:.....

By ticking or signing and returning this form to us you are confirming that you wish to be bound by its contents

Parent 1/Legal Guardian Name: Print _____

Signature _____ Date: _____

Parent 2/Legal Guardian Name: Print _____

Signature _____ Date: _____

UK GENERAL DATA PROTECTION REGULATIONS

Our Privacy Notices regarding the collection, safekeeping and use of your data can be found on our website ([Privacy Policy - Sedbergh School](#)) or by request from The Bursar (Compliance), Sedbergh School, Malim Lodge, Sedbergh LA10 5RY. (tr@sedberghschool.org) If you have any concerns about the data we hold or do not wish to receive any further communications from us, don't hesitate to contact The Bursar(Compliance).