

**City of London School for Girls
Preparatory Department Contact Card 2018-2019**

Pupil's Name:	Year:
Home address: Home telephone number:	Date of birth: Name and Year of sister(s) at CLSG: Name and Year of brother(s) at CLS:
Mother's name: Address (if not same as above): Home telephone number: Mobile telephone number: Work telephone number: Name used at work (if different):	Father's name: Address (if not same as above): Home telephone number: Mobile telephone number: Work telephone number: Name used at work (if different):
Please indicate how you wish correspondence to be addressed (e.g. Mr and Mrs Brown; Mr Brown & Dr Smith) Please provide an email address to which correspondence will be sent:	
Additional emergency contact name: Relationship to pupil: Home telephone number: Mobile telephone number: Work telephone number:	Preferred contact order: 1st contact – 2nd contact – 3rd contact –