



St. Columba's College

REGISTRATION FORM

If you wish to register a prospective pupil, please complete this form and return it to the address below, together with the registration fee, copy birth certificate and a copy of his/her last two school reports (if applicable).

**The Admissions Secretary
St. Columba's College
Whitechurch
Dublin 16**

**Tel: 00353 1 490 6791
Fax: 00353 1 493 6655
E-mail: admin@stcolumbas.ie
Web: www.stcolumbas.ie**

*Please circle as appropriate:

I hereby apply to have the under-named admitted as a ***Boarder/Day Boarder/Day Pupil**, subject to the appropriate entrance requirements. In the event of *his/her being admitted, I undertake that *he/she will be subject to the ordinary discipline of the College, and that I shall not remove *him/her without giving at least one term's notice or, alternatively, paying a term's fee in lieu of notice.

Full Name: _____ **Date of Birth:** _____
(in block letters)

Nationality: _____ **Religious Denomination:** _____

Present School (if of school age): _____

****Expected Year of Entry:** _____ ****Proposed Form at Entry:** _____

****NB: Early registration for proposed entry is strongly recommended.**

Please attach:

- a) A copy of his/her last two school reports (if applicable). b) A copy of his/her birth certificate.
- c) Payment of €100 (€60 for the second and each additional sibling) as registration fee payable to 'St. Columba's College', which I understand is non-refundable. Only Euro Cheques/Bank Drafts drawn on Irish banks can be accepted. Overseas payments may be made by Sterling Cheque, Bank Draft or by electronic banking (see bank details below), but we are unable to accept Euro Cheques/Bank Drafts drawn on foreign banks. Please attach notification of electronic payment with the Registration Form, if applicable.

Name of Account:	St. Columba's College		
Name of Bank:	AIB Bank, 40-41 Westmoreland Street, Dublin 2, Ireland		
Account Number:	07161068	Sort Code:	93-33-84
IBAN Number:	IE60AIBK93338407161068	BIC Code:	AIBKIE2D

Signed: _____ **Date:** _____
Parent

Name(s) of Parent(s)/Guardian(s): _____

Address: _____

Old Columban? (please ✓) Yes No

Tel: _____ **Mobile:** _____

Fax: _____ **E-mail:** _____

Please note that fee invoices are sent termly by email.

CERTIFICATE OF PRESENT PRINCIPAL: I have known _____ for the past _____ years and believing *him/her to be of good character, I have no hesitation in recommending *him/her as a suitable candidate for admission to St. Columba's College.

Signed: _____ **School:** _____