

County Borough of Birkenhead



H. GLYN WILKINSON, M.Sc., M.Ed
DIRECTOR OF EDUCATION
TELEPHONE No. 7000

EDUCATION OFFICES,

HAMILTON SQUARE,

BIRKENHEAD.

PLEASE QUOTE REF.:

.....

YOUR REF.:

1 JUL 1966

Dear Sir/Madam

SCHOOL AGREEMENT

With reference to your acceptance of the place offered to your son/daughter at the school named on the attached Form of Agreement, I should be glad if you would complete the particulars required on this Form and return it to this office as soon as possible, certainly within ten days of its receipt.

Please note that -

1. except for unavoidable reasons, the father or legal guardian of the child should give the undertaking;
2. the full name of the person giving the undertaking should be stated on the first line of the Form of Agreement and the address on the second line;
3. The signature is to be written across the 6d. stamp and the date of signing inserted in the space above;
4. the full name and address of the witness is required in addition to his or her signature. The witness should not be the wife of or be otherwise related to the person giving the undertaking.

A duplicate copy of the Agreement will be sent to you, in due course, for your retention.

Yours faithfully,

H. GLYN WILKINSON

Director of Education.