

Waterford and Lismore Diocese

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BOARD OF MANAGEMENT UPDATE FORM

SCHOOL	
ADDRESS	
ROLL NO	

Please tick ✓ as appropriate:

Patron's Nominee	Chairperson <input type="checkbox"/>	Patron's 2nd Nominee <input type="checkbox"/>
Parents' Nominee	Father <input type="checkbox"/>	Mother <input type="checkbox"/>
Teacher Nominee	Principal (<i>ex officio</i>) <input type="checkbox"/>	Teachers' Nominee <input type="checkbox"/>
Community	Agreed by 6 core members <input type="checkbox"/>	Name of Person vacating the BOM
If Officer of BOM	Secretary <input type="checkbox"/>	Treasurer <input type="checkbox"/>

New Member's Details: ✓ in appropriate box

V Rev Rev Mr Mrs Ms

Block Caps Please

Name _____

Home Address _____

IF AN OFFICER OF THE BOM:

Telephone Nos: (Home) _____ (Mobile) _____

Email: (Personal) _____

Signature of person notifying this change of membership:

Signed: _____ Date: _____