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**REGISTRATION FORM**

TO BE COMPLETED BY THOSE WITH **parental responsibility**[[1]](#footnote-1)FOR THE CHILD

PLEASE USE **BLOCK** CAPITALS

|  |  |
| --- | --- |
| CHILDS’ SURNAME: |  |
| CHILDS’ CHRISTIAN NAMES: |  |
| DATE OF BIRTH: |  |
| NATIONALITYBRITISH: |  |
| EUROPEAN: *(please specify)* |  |
| OTHER NON-EUROPEAN: *(please specify)* |  |
| PROPOSED DATE OF ADMISSION: |  |
| YEAR GROUP: |  |
| FIRST LANGUAGE & LANGUAGES SPOKEN AT HOME: |  |
| NAME OF CURRENT SCHOOL/NURSERY: |  |

|  |  |  |
| --- | --- | --- |
| **PARENT’S DETAILS** | Parent 1\* | Parent 2\* |
| Relationship to child: |  |  |
| Title: |  |  |
| Full name: |  |  |
| Address: |  |  |
| Occupation: |  |  |
| Nationality: |  |  |
| Home Telephone number: |  |  |
| Work Telephone number: |  |  |
| Mobile number: |  |  |
| Email addresses: |  |  |
| \*If you have parental responsibility for the child in a capacity other than as a parent of the child, please state your relationship to the child here: |

|  |
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| Are there any circumstances or conditions relating to your child of which the school should be aware? *(please tick below)* |
| ADHD |  | Allergies (please specify below) |  |
| Autism |  | Dyslexia |  |
| Hearing impairment |  | Visual impairment |  |
| Other(please specify below) |  | Dyspraxia |  |
| *Comments* |

**DECLARATION**

We request that the name of the above-named child be registered as a prospective pupil of St David’s Prep and we will pay a £50.00 non-refundable fee. (cheques made payable to St David’s Prep or online bank transfer sort code 30 95 89 sort code 47712868 reference: your surname).

By signing this Registration Form we understand, accept and agree that:

1. Registration of our child as a prospective pupil does not secure our child a place at St David’s but does ensure that our child will be considered for selection as a pupil at the school if a place is available.
2. If our child is offered a place at St David’s Prep such an offer will be subject to the School’s terms and conditions for the provision of educational services[[2]](#endnote-1), which will bind us (as the holders of parental responsibility for him/her) in the event, and from the moment, we accept the place.
3. If applicable, the School may request from our child’s present school or educational institution: (a) information and a reference in respect of our child; and/or (b) information about any outstanding fees and/or supplemental charges.
4. The School may process any personal data about us (or either of us) and our child, including sensitive personal data about our child (such as medical details), for the purpose of:
5. Administering its list of prospective pupils;
6. Its registration, selection and/or admission procedures, including as set out above and
7. Communicating with the parents of prospective pupils about the School and generally managing relationships between the school and its prospective pupils

|  |  |
| --- | --- |
| **Signed by:***(Signature)* | **Signed by:*****(****Signature)* |
| (*Print Name)* | (*Print Name)* |
| (*Date)* | (*Date)* |
| (*Relationship to child)* | (*Relationship to child)* |

1. Parental responsibility is defined in the Children Act 1989 as "*all rights, duties, powers and responsibilities and authority which by law* ***a parent*** *of a child has in relation to the child and his or her property*". It equates to legal responsibility for the child. If you have any doubts about whether you do or do not have parental responsibility for the child you may wish to seek legal advice. [↑](#footnote-ref-1)
2. A copy of the current term and conditions (known as the School’s parent contract) is available for your information upon request at any time, but please note that the version of the parent contract is supplied may be subject to change prior to the point in time when a place at the School for your child may be offered. [↑](#endnote-ref-1)