

Registration Form



This form needs to be signed by both Parents/Legal Guardians and returned to the Registrar.

We also require:

- £50 non-returnable Registration Fee (cheques payable to St. Clare's School).
- A copy of every child's Birth Certificate and proof of identity i.e. Passport.
- Proof of both Parent/Guardians' identity i.e. Passport/Driving License
- Copy of your child's latest School Report

Early registration is recommended. Registrations will be considered in the order they are received. Offers of places are subject to availability and the admission requirements of the School at the time offers are made. A copy of the current edition of the Terms and Conditions will be supplied on request.

1. **Surname of Your Child:** _____

First Names: _____

(Please circle the name generally used)

Home Address:

Date of Birth: _____ Nationality: _____ Religion: _____

Proposed Term and Year of Entry: _____ **Year Group:** _____

Have you registered your child's name at any other school(s) and if so, which?

2. **Father/Legal Guardian's Title, Full Names, Address (including postcode):**

Occupation:

Employer's business name and address:

Work Telephone:

Email address:

Home Telephone:

Mobile Telephone:

3. **Mother/Legal Guardian's Title, Full Names, Address (if different from the above):**

Occupation:

Employer's business name and address:

Work Telephone:

Email address:

Home Telephone:

Mobile Telephone:

4. Please mention here the names of any other members of the family attending the School or registered for entry; or any other connection with the School

5. Please say how you first heard of the School. Was it from:

Local Reputation Present School Friends (Please give details)

Advertisement Website Other (Please give details)

Details

6. Please state the name and address of the present school (with dates):

Name of Head:

7. Please outline any of your child's artistic, dramatic, musical or sporting skills or experience (if applicable):

8. Please give an outline of your child's other hobbies or interests (if applicable):

9. Please provide us with details of any medical condition (including allergies), disabilities or special educational need or learning difficulty of your child, using the Confidential Information Form (if applicable).

10. Please confirm whether your child is a Looked After Child (LAC).

Yes No

11. Please confirm whether your child is adopted.

Yes No

12. Please confirm whether your child will require sponsorship from the School in order to obtain a visa to study in the United Kingdom at this school.

Yes No

13. Please confirm whether there is any Court Order regarding access arrangements that the school should be aware of.

Yes No

If yes please give details.

Declaration

I/We request that the name of our above-named child be registered as a prospective pupil. [A cheque for the non-returnable registration fee of £50 is enclosed.] I/We understand that the Terms and Conditions of the School will undergo reasonable changes from time to time as circumstances require and will apply in all our dealings with the School. I/We understand also that the School (through the Head, as the person responsible) may obtain, process and hold personal information about our child, including sensitive information such as medical details, and we consent to this for the purposes of assessment and, if a place is later offered, in order to safeguard and promote the welfare of the child.

At Cognita we look after your personal information and only use your personal information for the purpose for which it has been collected. If you would like further information about how and why we use your personal information, please see our privacy notices; these are available on our website <https://www.stclares-school.co.uk/parents/school-policy-documents/>

First Signature: **Second Signature:**

Name in full: Name in full:

Relationship to the Child: Relationship to the Child:.....

Date: Date:

COGNITA

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