Halstead St Andrew's School Church Hill House Wilson Way Horsell Woking Surrey **GU21 4QW** 



Halstead St Andrew's School Woodham Rise Woking Surrey **GU21 4EE** 

## **REGISTRATION FORM - APPLICATION FOR ENTRANCE TO THE SCHOOL**

To be completed by those with parental repsonsibility for the child. Please type or use block capitals.

Pupil Deta	ails			Parent Two Details			
Surname				Full Name			
First Name				Title	Relationship to Child		
Preferred N	lame (if a	pplicable	)	Address			
			202/11/				
Gender			DOB (dd/mm/yyyy)				
Nationality	/ies						
racionancy	, 163						
Ethnicity	Ethnicity		Religion	Occupation	Nationality/ies		
				Cecapation	racionality, les		
Proposed D	Date of Ac	dmission	(term and year)	Mobile Number	Home/Work Number		
Is English tl	he child's	first lang	guage? (if no, please specify)	Email Address			
Yes	No						
Names of s	iblings (if	any)		*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 below.			
Parent On	e Detail	S		Please mention below the names of any other members of the family currently attending the School or registered for entry or, any other connection your family may have with the School.			
Full Name							
Title			Relationship to Child				
Address				Name and address of your child's present school/educational setting.			
Occupation			Nationality/ies				
Mobile Number			Home/Work Number	Parental repsonsibility is defined in the Children Act 1989 as "all rights, duties, powers and responsibilities and authority which by law a parent of the child has in relation to			
Email Address				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 repsonsibility for the child. you may wish to seek legal advice.			
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Date of Entry			Name of Headteacher		By signing this Registration Form, we understand, accept				
					d agree that:  Our application does not secure our child a place				
Medical Information							at the School, but does ensure our child will be considered for selection as a pupil at the School;		
Please provide all details of any health of medical condition(s), special educational need (s), disability or allergy that your child has (whether underlying, short-term or long-term).						<ul> <li>2. If our child is offered a place at the School, such an offer will be subject to the school's terms and conditions for the provision of educational services*, which will bind us (as the holders of parental responsibility for our child) in the event (and from the</li> </ul>			
Please tick as appropriate and provide all relevant details, including any reports or other materials.						3.	moment) that we accept the place; If our child is offered a place at the School, such		
	ADHD				Allergies (specify below)		an offer will be subject to us proving that our child has the right to enter, live and study in the United Kingdom;		
	Asper	rger's Sy	ndrome		Autism	4.	If applicable, the School may request from our child's present school or educational setting: (a) information and a reference in respect to our child; and/or (b) information about any outstanding fees and/or supplemental charges;		
	Dysle	exia			Dyspraxia				
	Heari	ng Impa	irment		Visual Impairment	5.	The information provided in this Registration Form is true, accurate, complete and not misleading. We		
Other (specify below)						will notify the School if there are any changes to the information provided to the School or our/our child's circumstances.			
						Signed by: (parent one)			
						Signature			
Important - If you withhold or otherwise misrepresent any information of this nature, this may result in the school declining to make an offer of a place to your child or						Full Name			
exercising its right to end the						Date	<b>-</b> -		
Are there any other circumstances relating to you or your child of which the school should be aware of? (if yes,						Dat	te		
please specify)			L11001 S1101	ild be aware or: (if yes,		Relationship to Child			
	No	Ye	S						
Are there any special arrangements that need to be made for your child to visit for a taster session?							Signed by: (parent two) Signature		
(IT yes		e specify				0.8			
	No	Ye	S			Ful	l Name		
<b>Declaration</b> We (as the holders of responsibility for him/her) wish to apply for a place at the School for the above-named child. We have arranged a bank transfer for <b>non-refundable</b> Registration Fee of £100 to:						Date			
						Dal	ationship to Child		
Sort Code: 20-97-58 Account No.: 10771880  Account Name: Halstead St Andrew's School Trust Ltd						ĸei	ationship to Child		

**IBAN:** GB63BUKB20975810771880 **BIC:** BUKBGB22



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\* A copy of the current terms 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 supplied may be subject to change prior to the point in time when a place at the School for your child may be offered.

## HOW MAY WE USE YOUR PERSONAL INFORMATION?

The School may process personal data about you (or either of you) and your child, including sensitive personal data about your child (such as medical details) in accordance with data protection law for the purposes of:

i) administering its lists of prospective pupils;

ii) its registration, selection and/or admission procedures, including those set out as above: and iii) communicating with the parents of the prospective pupils about the school and generally managing relationships between the school and its prospective pupils.

Even if your child is not offered a place at the School, we retain information about prospective pupils and their parents for a year. Please let the Head of Admissions know if you have any questions or concerns about this.

Further information about how the School processes personal data is set out in the School's Privacy Notice, which is on the School's website and is otherwise available from the School at any time upon request.

## **Continuation Sheet** (if required)

Please provide any additional information in the space below that you were not able to include in the main Registration Form.