# **Registration Form**

Please complete this form in as much detail as possible. We need this information to be able to process your application for a place for your child. Information which is mandatory for you to provide is indicated below by a \*. If you do not complete the mandatory sections in full this may jeopardise or delay your application.



Please submit the form, along with the completed Confidential Information Form, a copy of your child's full birth certificate and the £100 Registration Fee to **admissions@warwickprep.com** or **The Registrar, Warwick Preparatory School, Banbury Road, Warwick CV34 6PL** 

Your child  Surname of your child*							
First names* (capitalise preferred name)							
Date of birth*	Gender	М	F	Religion	Fir	st Language	
Type of place* (please tick)							
Nursery (3+) Reception (4+)	Year 1 (5+)	Yea	ar 2 (6+)	Year 3 (7+)	Year 4 (8+)	Year 5 (9+)	Year 6 (10+)
Proposed term and year of entry*	Autumn	Spring		Summer	Year		
Nationality							
Is your child British or Swiss or from a cou	untry within the	Europ	ean Eco	nomic Area?*	Yes No		
If you answered No above please state y	our children's r	nationa	lity.				
First signatory				Second signatory			
Title* (e.g. Miss, Mrs, Ms, Mr)				Title* (e.g. Miss, Mrs, Ms, Mr)			
Full name*				Full name*			
Relationship to child*			Relationship to child*				
Contact telephone number*			Contact telephone number*				
Evening (if different)				Evening (if differe	ent)		
Mobile (if different)				Mobile (if differen	nt)		
Email address*				Email address*			
Address*				Address*			
P	ostcode					Postcode	
Occupation			Occupation				
Employer's business name and address				Employer's busin	ess name and ad	dress	

itle	Full name	Contact telepho	one
Address		Contact telepho	
ostcode		Email	
someone of	ther than the first and second signatories ship to the child.	is to pay the School fees for your child, please pro	ovide their full name and address ar
	·	r child's present school/nursery (if applicab	ole)
ame and ad	Idress of school/nursery*		
ates of atter	ndance*	Name of Head*	
lease mention Warwick Sch		s of the family attending or registered for entry at ar connection with the Foundation. Please indicate if e	
oes your	child have any siblings? Yes	No Date of Birth	M F
chool attend	ded		
bling 2 Nam	ne	Date of Birth	M F
chool attend	ded		
ibling 3 Nam	ne	Date of Birth	M F
chool attend	ded		
'lease out	line any of your child's artistic, di	ramatic, musical or sporting skills or exp	erience (if applicable)
ease give	e an outline of your child's other	hobbies or interests (if applicable)	
your chil	d affected by (please tick yes or no)		
any medic	cal condition, health problem or allergy?	Yes No	If you have answered YES please provide any necessary details on

Yes

No

any behavioural, emotional and / or social difficulty?

Please confirm whether your child will require sponsorship from the Foundation in order to obtain a visa to study in the United Kingdom at this School (if applicable)

Yes

No

#### Notes

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 Foundation's Terms and Conditions will be supplied on request. When your child moves onto any of the schools within Warwick Schools Foundation, then no further Registration Fees will be payable.

#### How we will use the information provided in this form

This information will be used by the School during the admissions process in order to manage and assess your application and your child's suitability for a place at the School.

For example:

- a) we may contact your child's current or previous school to ask for a reference;
- b) we may ask for information about other schools to which you are applying because they may hold their entrance exam on the same day as ours:
- c) we may contact other people with parental responsibility to check that they consent to your child joining the School;
- d) the Confidential Information Form will be used to ensure that we have made any reasonable adjustments/suitable arrangements for your child when they visit the School or during any entrance assessments and subsequently if they are offered a place;
- e) we may share your information with credit reference agencies.

If your child is not offered a place, or if you do not accept the offer of a place, we will only retain this information for as long as we need to. Unless there are exceptional circumstances, information is kept for a year after the end of the admissions process.

For more information about how the School will use your information, and your child's information, please see our pupil privacy notice and our parent privacy notice. Both of these documents are published on the School's website: <a href="water-weight-new-com/information/information/policies">water-weight-new-com/information/information/policies</a>

#### Declaration

I/We request that our child named above is registered as a prospective pupil.

I/ We understand that the Foundation or the School (through the Head, as the person responsible) may obtain, process and hold personal information about me / us which may include financial information provided by me / us or by any licensed credit reference agency or information contained in any court orders, petitions or proceedings.

I/We understand that the Foundation or the School may also obtain, process and hold personal information about our child which may include 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.

I/We enclose the non-refundable Registration Fee of £100 together with this completed Registration Form duly signed by me/us.

Signatures of parents / legal guardians (both signatures required unless another arrangement has been made with the school)				
	First parent / legal guardian		Second parent / legal guardian	
Signature				
Name in full (please include all names)				
Date of birth				
Relationship to child				
Date				

Please indicate how you first heard of the School (please tick all relevant boxes)				
Local reputation	Recommendation – Friends/Family	School website	Social Media	
Advertisement	Open Event	Used to be a pupil		
Passing school/signage	Holiday Action	Other		

# **Confidential Information Form**

All information received in this form will be treated in confidence.

Child's full name
Name of first signatory (as appears on the Registration Form)
Name of second signatory (as appears on the Registration Form)

## Please disclose any medical condition, health problem or allergy affecting your child

If applicable to your child, it will also help us plan for their arrival, if you can let us know of any:

- Learning Difficulty
- Special Educational Need
- Disability
- Behavioural, Emotional and/or Social Difficulty

The information provided in this form will enable the School to consider any adjustments that it may need to make to assist your children when he/she enters the school.

Please provide us with as much detail as possible in the space below. Where possible, please provide any relevant documentation such as medical reports, assessments etc.

The information requested on this form is needed because the School has contractual and statutory duties towards your child. For more information about how the School will use your information, and your child's information, please see our pupil privacy notice and our parent privacy notice. Both of these documents are provided with the letter of offer and published on the School's website:

warwickprep.com/information/information/policies

### Enclosures with completed Registration Form:

Registration fee of £100. Please call the Finance Department on 01926 735414 to make payment over the phone or alternatively, you can pay by BACS:

Account number: 00731875

Sort code: 309915

Account name: Warwick Prep Fees account Bank: Lloyds (Please put your child's full name as the reference)

Copy of full birth certificate which lists both parents

Confidential Information Form