



CHILD'S DETAILS DOB Gender

Surname

First Names

Nationality First Language
(As per passport)

Religion *(if Christian, please state denomination)*

Sibling/s at New Hall
(name/s and Year Group/s)

ENTRY DETAILS

Proposed year of entry Michaelmas Term (Sep-Dec) Lent Term (Jan-Mar) Trinity Term (Apr-Jul)

Year Group: *Nursery* *Pre-School* *Reception* *Yr 1* *Yr 2*

Yr 3 *Yr 4* *Yr 5* *Yr 6* *Yr 7* *Yr 8* *Yr 9* *Yr 12*

Status: *full boarder** *flexible boarder** *day student*

Does your child have any medical conditions or special educational needs?
(please detail and use extra sheet if necessary)

PARENTS' DETAILS

Parent 1
 Title Full Name

Parent 2
 Title Full Name

Address *(including postcode)*

Address *(including postcode)*

Tel:

Tel:

Mobile:

Mobile:

Email:

Email:

Profession:

Profession:

Name of Employer:

Name of Employer:

If parents are separated, please indicate at which address the student resides. Parents living abroad will be asked to nominate a guardian in the UK.

CURRENT NURSERY/SCHOOL DETAILS

Name of Nursery/School

Address

(including postcode)

Email

Nursery Manager/Headteacher's Name

Are you or any of your family former students of New Hall School?

(please give details of name/s (including maiden name/s) and dates)

How did you hear about New Hall?

Parish Advertisement Website ISCis/agent (please state)

Word of mouth Other (please specify)

Other school/s which you are considering for your child

DECLARATION

- I/We request that the name of our above-named child be registered as a prospective student.
- I/We understand that registering the above-named child does not guarantee entry into the School and that waiting lists may be in operation.
- 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 may obtain, process and hold personal information about my/our child, including sensitive information such as medical details, and I/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 understand that the School will make enquiries to my/our child's current Nursery/School for confirmation that all sums due and owing to such Nursery/School/s have been paid and consent to your informing any other Nursery/School or educational establishment to which I/we propose sending my/our child if any fees of this school are unpaid.
- I/We understand that it is our responsibility to update the School if any of the above details change.

This form should be sent to the Admissions Department together with the non-returnable registration fee of **£100.00** (plus an additional fee of **£51.00** for overseas students who require a visa, making **£151.00** in total). Cheques should be made payable to New Hall School Trust. By completing the registration form, I/we give New Hall permission to contact the named child's current school for a reference. Please advise in writing at the time of registration if you do not wish for the named child's current school to be contacted prior to their attendance at entrance assessments. At the appropriate time, you will receive details of the entrance assessments and, subject to your child completing the school's entrance requirements satisfactorily, you may be offered a place and invited to complete an Acceptance Form.

I/we have read the Privacy Notice

(Downloadable from the website)

Parent 1 Signature

Date

Parent 2 Signature

Date