



## Registration Form

Full Name of Proposed Pupil: \_\_\_\_\_

Family Name: \_\_\_\_\_ First Name: \_\_\_\_\_ (Boy  Girl )

Preferred Name: \_\_\_\_\_ Date and Country of Birth: \_\_\_\_\_

Nationality: \_\_\_\_\_ Religion: \_\_\_\_\_

First Language: \_\_\_\_\_ Second Language: \_\_\_\_\_

Desired Date of Entry:  September  January  April 20\_\_\_\_ as a Boarding  Weekly  Day Pupil

Special Education Needs: Yes  No  Educational Psychologist's / School report attached: Yes  No

Name and Address of Present School: \_\_\_\_\_

Telephone No: \_\_\_\_\_ Fax No: \_\_\_\_\_ Name of Head: \_\_\_\_\_

Full Name of Parents, Agent or Guardian (delete as applicable): \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Telephone No: (day) \_\_\_\_\_ (evening) \_\_\_\_\_

Mobile No: \_\_\_\_\_ Email: \_\_\_\_\_ Fax No: \_\_\_\_\_

Occupation of Father: \_\_\_\_\_ Mother: \_\_\_\_\_

I enclose cheque for £100.00 made payable to Box Hill School, which is a **non-refundable** registration fee. I understand that this does not imply that the above-mentioned child has been accepted for entry, which shall be conditional on: interview, entrance examination where appropriate, report from the child's present school, and the availability of places at the time.

Date: \_\_\_\_\_ Signature: \_\_\_\_\_

I was recommended to Box Hill School by: \_\_\_\_\_ I am a present  past  parent at Box Hill School

When completed, this form should be sent together with the **registration fee** and a passport size **photograph** to Box Hill School at the address below:

