9. REGISTRATION FEE PAYMENT

 \Box I/We have paid £100, which is a non-refundable fee by bank transfer on __/_/_ (enter date). Please give your child's name as reference.

BANK DETAILS

Bank Address:	National Westminster, Crompton House, Derwent Street, Derby DEI 2ED
Account Name:	Repton Preparatory School Account
Account No:	05858275
Sort Code:	60 12 01
IBAN No:	GB 07 NWBK 60120105858275
IBAN BIC No:	NW BK GB 2L

10. HOW WE WILL USE THIS INFORMATION 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:

- we may contact your child's current or previous school to ask for a reference;
- 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;
- we may contact other people with parental responsibility to check that they consent to your child joining the school;
- the Learning Support and Medical Information 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;
- 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. Please show your child a copy of the pupil privacy notice and discuss it with him/her. The information provided in this form will enable the school to consider any adjustments that it may need to make to assist your child to partake in the school's admissions procedure or when he/she enters the school. The information requested on this form is needed because the school has contractual and statutory duties towards your child.

FIRST SIGNATORY

SECOND SIGNATORY

Signature:	
Title: (e.g. Mr, Mrs, Ms)	
Name(s) in full: (please include all names)	
Date of birth:	
Relationship to child:	
Date:	

Please send the completed form and registration fee to the Registrar, Foremarke Hall, Repton Preparatory School, Milton, Derbyshire DE65 6EJ, UK



For	office	use	only:	Registration fee r	eceived
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Foremarke Hall, Repton Preparatory School, Milton, Derbyshire DE65 6EJ, Tel: 01283 707100 | www.formarke.org.uk

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Repton Preparatory School, a company limited by guarantee, registered in England No 4390208, a registered charity. Registered office: The Bursar's Office, Repton School, Repton, Derbyshire DE65 6FH

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PTON PREPARATORY SCHOOL

1. CHILD DETAILS

Child's Surname:	First Name(s):
Preferred First Name:	Initials :
Gender, identifies as: 🗌 Male 🗌 Female	Date of Birth (dd / mm / yyyy):
Sibling(s) currently at Foremarke Hall:	
Child of Old Foremarkian:	\Box Yes \Box No
2. ENTRY DETAILS	
Proposed Term and Year of Entry:	
Type of place required: (please tick): 🗌 Day Pupil 🔅 🗌 F	Full Boarder 🛛 Weekly Boarder 🔅 Home & Away Boarder

3. DETAILS OF PARENT(S) OR LEGAL GUARDIAN(S)

Correspondence should be sent to: (please delete as appropriate): Father / Mother / Both

FIRST SIGNATORY	SECOND SIGN	NATORY	Is Foremarke Hall your first choice?
Title:	<u> </u>		
Surname:			5. FURTHER INFORMATIO
First Name(s):			Please say how you first heard about
Nationality:		· · · · · · · · · · · · · · · · · · ·	Please outline any of your child's art
Relationship to child:	<u> </u>	·····	
HOME	If Different		Please give an outline of your child's
House/Street:			
Street/Village:			If your child has been studying Frend
Town/City:	<u> </u>		
County:	<u> </u>		
Postcode:	<u> </u>		
Country:	<u> </u>		6. LEARNING SUPPORT & 1
Home Tel:			Please disclose any medical conditio
Mobile:			details of any Learning Difficulty, Spe
E-mail:			
Occupation:			Parents/legal Guardians are required
Work Tel:			school. Please send copies of any ass
Work email:			
Place of work:	<u> </u>		Does the child have a Learning Diffic
With whom does the child live? Please tick:	□ First Signatory	□ Second Signatory □ Other	
If other, please specify			Does the child have any disabilities r
To which address should information be sent?	□ First Signatory	Second Signatory	
Is there any family connection to Foremarke Hall?	□ Yes	□ No	Does the child have any medical con
(If yes, how?)			
Are any family members currently at, or registered for Foremarke Hall?	□ Yes	□ No	Does the child attend a Consultant?
(If yes, how?)			

			d:
Address:			
Postcode Email	address:		
4. CURRENT SCHOOL DE	ΓAILS		
School Name:			
Address:			
Postcode:		Country:	
Head's Name:		School Tel:	
Date of attendance:			
Are you registering your child at an	y other school(s)?	□ Yes	□ No
If yes, please tell us which school(s)	:		
Is Foremarke Hall your first choice?	,	□ Yes	□ No
5. FURTHER INFORMATIC Please say how you first heard abou Please outline any of your child's ar Please give an outline of your child's	it Foremarke Hall: tistic, dramatic, musical or	sporting skills or	
Please say how you first heard abou Please outline any of your child's ar	it Foremarke Hall: tistic, dramatic, musical or s other hobbies or interest	sporting skills or ts: (if applicable):	experience: (if applicable):
Please say how you first heard abou Please outline any of your child's ar Please give an outline of your child's	it Foremarke Hall: tistic, dramatic, musical or s other hobbies or interest	sporting skills or ts: (if applicable):	experience: (if applicable):
Please say how you first heard abou Please outline any of your child's ar Please give an outline of your child's	it Foremarke Hall: tistic, dramatic, musical or s other hobbies or interest ch or Latin, please would y	sporting skills or ts: (if applicable): you let us know t	experience: (if applicable):
Please say how you first heard abou Please outline any of your child's ar Please give an outline of your child's If your child has been studying Fren 6. LEARNING SUPPORT & Please disclose any medical conditio	It Foremarke Hall: tistic, dramatic, musical or s other hobbies or interest ch or Latin, please would y MEDICAL INFORM on, health problem or aller	sporting skills or ts: (if applicable): you let us know the ATION gy affecting the ch	experience: (if applicable):
Please say how you first heard about Please outline any of your child's art Please give an outline of your child's If your child has been studying Fren 6. LEARNING SUPPORT & Please disclose any medical condition details of any Learning Difficulty, Spo	It Foremarke Hall: tistic, dramatic, musical or s other hobbies or interest ch or Latin, please would y MEDICAL INFORM on, health problem or aller, ecial Educational Need, Dis	sporting skills or ts: (if applicable): you let us know the ATION gy affecting the ch sability or behaviour re of any specific of	experience: (if applicable): he details: hild. If applicable to the child please also provide pural, emotional and/or social difficulty.
Please say how you first heard about Please outline any of your child's art Please give an outline of your child's If your child has been studying Fren 6. LEARNING SUPPORT & Please disclose any medical condition details of any Learning Difficulty, Spo Parents/legal Guardians are required	tistic, dramatic, musical or tistic, dramatic, musical or s other hobbies or interest ch or Latin, please would y MEDICAL INFORM on, health problem or aller, ecial Educational Need, Dis d to make the school awar sessments regarding the d	sporting skills or ts: (if applicable): you let us know the ATION gy affecting the ch sability or behaviour re of any specific of	experience: (if applicable): he details: hild. If applicable to the child please also provide pural, emotional and/or social difficulty.

If someone other than the first or second signatory is to pay the school fees for the applicant please provide details:

al conditions of which the school should be aware? \Box Yes \Box No (If Yes please provide details):

 \Box Yes \Box No (If Yes please provide details):

7. NATIONALITY

Please confirm the Nationality of the applicant and enclose a copy of their Birth Certificate and Passport (and Visa if applicable). If these documents are not submitted the Registration process will be delayed.

Nationality:

First Language:

Religion:

If the applicant is a national resident of a country outside the EEA, or if you have provided a home address for correspondence outside the EEA, please note that Foremarke Hall is required to take steps to ascertain that you child has permission to be in the UK. We require this data in accordance with our responsibilities as a Sponsor and will share this information with the Taylor Partnership.

Please confirm whether your child will require sponsorship from the school in order to obtain a visa to study in the UK:

🗆 Yes 🗆 No

If another valid immigration category applies please provide full details below:

Please note that we reserve the right to:

- request further information and sight of documentation in support of your declarations regarding immigration; and
- to share information with UK Visas and Immigration (UKVI) and the Home Office for the purposes of compliance with our responsibilities as a licenced sponsor. The school may be required to notify and/or supply information relating to your (i.e. the parents) and/or your child's right to enter, reside and/or study in the United Kingdom to UKVI and the Home Office (and to do so whether we sponsor your child or not).

8. DECLARATION

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 school's Terms and Conditions will be supplied upon request. Please tick to confirm you agree with the below statements

- I/We request that the above named child be registered as a prospective pupil.
- I/We have paid the non-refundable Registration fee of $\pounds 100$.
- I/We confirm that we have provided all of the information requested to the best of my/our ability.
- I/We understand that this registration form does not give rise to a commitment by the school of the parent(s) and that the offer of a place is subject to availability and the entry requirements of the school at the time of offer.
- I/We understand that in the event that 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 as set out in the Foremarke Hall, Repton Preparatory School Parent Contract which will bind me/us in the event that we accept the place.
- I/We understand that these terms and conditions may undergo reasonable changes from time to time as circumstances require and will apply in all our dealings with the school.