



St Wystan's

Independent Preparatory School and Nursery
for Boys and Girls aged 2¹/₂ to 11 years

Headteacher: Mrs Karan Hopkinson MA

Registration Form for School and Nursery

Pupil's Surname	
Pupil's Forename (s)	
Pupil's Preferred Name	
Date of Birth	
Nationality	
Language spoken at home (if not English)	
Religious Denomination	
Ethnicity * you may choose not to answer this question if you wish	
Admission Date	
Entry to School or Nursery	
If your child is entering nursery, do you wish to reserve a place for entry into Kindergarten?	Yes / No
Name of present school (or nursery)	
Address of present school (or nursery)	

High Street Repton Derby DE65 6GE 01283 703258
head@stwystans.org.uk www.stwystans.org.uk



Registered Charity 527181

Present school (or nursery) email	
Full name of Father/ Legal Guardian	
Address (including post code)	
Father/Guardian occupation	
Daytime Telephone No.	
Home/Mobile No.	
Email address	
Name and address of Father/ Legal Guardian's employer	
Name and address of Father/Legal Guardian's bank	
Full name of Mother/ Legal Guardian	
Address (including post code) if different from above	
Mother/ Legal Guardian occupation	
Daytime Telephone No.	
Home/Mobile No.	
Email address	
Name and address of Mother/ Legal Guardian's employer	
Name and address of Mother/ Legal Guardian's bank	
Where parents or legal guardians have different addresses, please indicate with whom the child lives	Mother Father

	Legal Guardian
Special Education Needs, learning support, medical conditions and disabilities for which your child may need reasonable adjustments:	
Has your child ever had a specialist assessment (eg Educational Psychologist's Assessment) or any additional support in their present setting?	Yes (please supply details separately) / No No
Do you wish to apply for bursary/financial assistance towards the fees?	Yes / No
Are there any family connections with St Wystan's School?	Yes / No
How did you hear about St. Wystan's School?	Advert Online Present school or nursery Word of mouth Current parent Other (please specify)
If recommended by a present parent or member of staff, please give their name	
<p>Has every person with parental responsibility for the child approved this form?</p> <p>(We are legally obliged to have the full details of all adults who have parental responsibility for a child and ask that you provide this information in the Parent / Legal Guardian boxes above. If only one person is mentioned, please provide a brief explanation.)</p> <p>Yes / No (if no please supply details in confidence)</p>	

Declaration

I/We understand and agree that

1. Registration of our child as a prospective pupil does not secure our child a place at the School but does ensure that our child will be considered for selection as a pupil at the School;
2. The School, as a registered Data Controller, will process personal data about us and our child, including sensitive personal data such as medical details. We consent to the processing of our data and our child's data; for further information on how we use your data, please refer to the Data Protection Policy.
3. 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, which will bind us in the event that we accept the place;
4. If our child is currently at another independent school it is our responsibility to ensure that our obligations to that school are honoured in full.

We request that our child be registered as a prospective pupil. A non-returnable deposit of one hundred pounds is enclosed.

We confirm that we will abide by the school's standard Terms and Conditions, as applicable at the date of first registration of our child.

Name in full	Name in full
Relationship to child	Relationship to child
Signed	Signed
Date	Date