

Registration Form

Early registration is recommended. Families seeking admission for their children should complete this form below and return it to the school along with a bank transfer of £120 (inc VAT) to cover the cost of the non-refundable registration fee. This does not secure your child's place, but confirms an interest in accepting a school place.

Pupils Surname	
Pupils Forename	
Preferred Name	
Date or Birth	
Religion	
Ethnicity	
Language Spoken	t Home (if not English)
Admission Date	
Name of Current S	chool or Nursery (if Applicable) Please include contact details
Are there any fam	y connections with St Wystan's School?
Yes	No If Yes Please Explain

Parents Details	(please notify the	e school of any ch	anges)
Parent 1 / Lega	l Guardian		
Full Name			
Address			
Contact Teleph	one Number		
Email			
Parent 2 / Lega	l Guardian		
Full Name			
Address			
Contact Teleph	one Number		
Email			
	are different, please	Indicate with which p	arent the lives with.
Advert	Online	Word of mouth	Other
give their name	e below	· 	f member, please
child and ask that you		n in the Parent / Legal G	parental responsibility for a uardian boxes above. If only

Do you wish to apply for bursary assistant towards the fees?					
Yes No					
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 confirms an interest in attending 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; 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 has been transferred via bank deposit. 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.					
Signature	Signature				
Name	Name				
Date	Date				

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