



## School Registration Form

The complete form should be sent together with a photocopy of your child's birth certificate to the School Office, along with £275 (£75 non-refundable Registration Fee and £200 Deposit, refundable when your child leaves Edenhurst). Please send payment via BACS. Our account details are as follows: Sort code: **20-59-49** Account Number: **53612643**, Reference: child's surname. Please write all details in BLOCK CAPITALS.

### Child's Details

Child's Forename(s): \_\_\_\_\_ Gender: \_\_\_\_\_

Child's Middle names(s): \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Child's Surname: \_\_\_\_\_ Religious Denomination: \_\_\_\_\_

Desired Date of Entry: \_\_\_\_\_ Entry Year (e.g. Reception): \_\_\_\_\_

Language spoken at home (if not English): \_\_\_\_\_ Nationality: \_\_\_\_\_

Any specific medical \_\_\_\_\_ Ethnicity\*: \_\_\_\_\_  
or educational needs

**Ethnicity Key:** WHB British; WHR Irish; WHT Traveller of Irish Heritage; WRO Gypsy/Roma; WHA Any other White background; MWB White and Black Caribbean; MBA White and Black African; MWA White and Asian; MOT Any other mixed background; AIN Indian; APK Pakistani; ABA Bangladeshi; AOO Any other Asian background; BLB Caribbean; BLF African; BLG Any other Black background; CHE Chinese; OEO Other ethnic background; REF Decline to record ethnicity.

### Parent/Guardian(s) with Parental Responsibility for Child

PARENT / CARER 1		PARENT / CARER 2	
Title		Title	
Full Name		Full Name	
Relationship to Child		Relationship to Child	
Address		Address	
Postcode		Postcode	
Home Tel. No.		Home Tel. No.	
Mobile Tel. No.		Mobile Tel. No.	
Email		Email	
Date of Birth		Date of Birth	
Occupation		Occupation	

If parents are separated, who does the child normally live with? \_\_\_\_\_

**Other Contacts** *(Please provide details, and photographs, for any other parent, step-parent, guardian or emergency contact)*

CONTACT 1		CONTACT 2	
Title		Title	
Full Name		Full Name	
Address		Address	
Postcode		Postcode	
Home Tel. No.		Home Tel. No.	
Mobile Tel. No.		Mobile Tel. No.	
Relationship to child		Relationship to child	

**If there are any legal restrictions on who has contact with the child, please provide details here:**

\_\_\_\_\_  
\_\_\_\_\_

**Current Nursery/School attended**

Name: \_\_\_\_\_ Head: \_\_\_\_\_

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

\_\_\_\_\_ Postcode: \_\_\_\_\_

Contact Numbers(s): \_\_\_\_\_

**Where did you hear about Edenhurst?** \_\_\_\_\_

**Future School(s) desired:** \_\_\_\_\_

## Medical Information

Details of Family Doctor	
Name	
Address	
Telephone Number	

Medical/Dietary Requirements		
Dietary requirements, preferences, food allergies/intolerances and religious observances		
Any known illness or chronic/recurring medical condition		
Any on-going medicine prescribed		
Special instructions		
Special needs		
Any activities that you wish your child to be excluded from		
I/WE DO	I/WE DO NOT	give permission for the School to administer my child's <b>ongoing prescribed medication</b> and will notify the School immediately of any changes to his/her prescription
I/WE DO	I/WE DO NOT	Confirm that my child suffers from <b>ASTHMA</b> and will provide a named inhaler to be kept in school at all times for my child's use.

## HOME-SCHOOL AGREEMENT ACCEPTANCE

I/We hereby request a place at Edenhurst Preparatory School for:		
<i>(full name of child)</i>		with effect from <i>(date)</i>
and enclose <b>£275</b> (£75 non-refundable Registration Fee and £200 Deposit).		
Please tick as appropriate:		
I/WE DO	I/WE DO NOT	acknowledge and agree that the School's <b>Terms and Conditions</b> as varied from time to time, form part of the contract between us/me and the School. A copy can be found on the School website.
I/WE DO	I/WE DO NOT	agree to pay the <b>fees and supplementary charges</b> when due, and undertake to give in writing, a full term's notice of removal, or non-start, or to pay a term's fees in lieu thereof.
I/WE DO	I/WE DO NOT	give permission for my/our child to attend <b>local trips out of the School</b> that are part of the normal school routine, eg. minibus transport to the swimming baths, walking to St. Giles Church etc.
I/WE DO	I/WE DO NOT	agree for the School staff to administer and seek <b>Emergency First Aid</b> in the event of an accident or illness, including taking my/our child to hospital to receive any treatment required.
I/WE DO	I/WE DO NOT	consent, on the advice of an appropriately qualified medical specialist, to my/our child receiving <b>Emergency Medical Treatment</b> , including anaesthetic blood transfusion and surgical procedure (under the NHS) if the School staff are unable to contact me/us in time.
I/WE DO	I/WE DO NOT	acknowledge that Edenhurst Preparatory School is committed to every child having safe and happy experiences with them. To ensure this, they monitor, and where necessary, seek advice to ensure my/our child's future.
I/WE DO	I/WE DO NOT	understand that <b>Child Safeguarding Policy and Procedures</b> are in place within the School and are available for my inspection at any time.
Edenhurst Preparatory School and Nursery and its parent company, Bellevue Education Group, from time to time use photographs, video, DVD and other multimedia images of children who attend the School. These images are used for both educational reasons (internal) and promotional purposes (external). The use of images for external purposes include: in prospectuses, website, newsletters, newspapers, promotional displays, multimedia presentations, YouTube and on the School's social media pages (Facebook, Twitter and Instagram).		
I/WE DO	I/WE DO NOT	give permission for my/our <b>child's image to be used for external purposes</b> for the School, Nursery and Bellevue Education Group.
I/WE DO	I/WE DO NOT	give permission for my/our <b>child's name to be used for external purposes</b> in the local media alongside images.
I/WE DO	I/WE DO NOT	<b>agree to be jointly and severally responsible for the fees and to give at least one term's notice of leaving, in writing.</b>
<b>I/We sign to give consent for all of the above, unless specified otherwise.</b>		
<b>PARENT / CARER 1</b> Signed		<b>PARENT CARER 2</b> Signed
Date		Date