

PREP & SENIOR SCHOOL REGISTRATION FORM

Please complete this form in BLOCK CAPITALS and keep the School informed of any changes to information given on this form



Culford

1. CHILD'S DETAILS

Surname	<input type="text"/>	First name(s)	<input type="text"/>
Boy <input type="checkbox"/>	Girl <input type="checkbox"/>	Date of Birth	<input type="text"/>
Nationality	<input type="text"/>	Preferred name	<input type="text"/>
First language	<input type="text"/>	Religion (if any)	<input type="text"/>
Siblings at Culford	Yes <input type="checkbox"/>	No	<input type="checkbox"/>

Please supply a high quality scan or photocopy of your child's birth certificate.

2. PRESENT SCHOOL (if applicable)

School name	<input type="text"/>
Head Teacher's name	<input type="text"/>
Address	<input type="text"/>
	Postcode <input type="text"/>
Tel	<input type="text"/>
Email	<input type="text"/>

Please list all previous schools attended:

Name	<input type="text"/>	Location	<input type="text"/>	Dates	<input type="text"/>
Name	<input type="text"/>	Location	<input type="text"/>	Dates	<input type="text"/>
Name	<input type="text"/>	Location	<input type="text"/>	Dates	<input type="text"/>

3. ENTRY DETAILS

Proposed entry date: Autumn Spring Summer Year

ENTRY TO PREP or SENIOR SCHOOLS

Please indicate the type of place you are seeking for your child:

Boarding Part Boarding Day Undecided

SCHOLARSHIPS and BURSARIES

Please indicate whether you will be seeking:

a Scholarship Award a means-tested Bursary

(You may tick more than one)

REGISTRATION FORM continued

4. GIFTS, TALENTS and/or SPECIAL NEEDS

Is your child gifted or talented in particular subjects, sports or activities?

(Please give details below)

Has your child ever had any extra support for learning difficulties or special educational needs?

Yes No

(If Yes, please give details below including any specific requirements for entrance tests)

Has your child ever had or currently have a Statement of special educational needs or an Educational Psychologist's Report?
(Including a report by an Educational Professional) *(If Yes, please enclose a copy)*

Yes - statement Yes - Ed Psych report No
 Education Health & Social Plan Yes - by Education Professional Other relevant report

5. GENERAL HEALTH

Are there any specific emotional, psychological or physical experiences of which the School should be aware?

Yes No

(If Yes, please give details in the text box at the end of this section)

Does your son/daughter take any prescribed medication on a regular basis?

Yes No

(If Yes, please give details below)

6. VISA REQUIREMENTS

Is the School required to act as a visa sponsor to non EU children?

Yes No

8. DECLARATION

I/We understand that Registration does not guarantee a place at Culford. Offers of a place are subject to availability and upon a candidate satisfying the School's admissions requirements and passing the appropriate entrance examination and/or assessment. A copy of the School's Standard Terms and Conditions will be supplied upon request and at the time an offer is made.

I/We also understand that a reference will be requested from our child's present and/or previous school(s) prior to sitting the Culford entrance tests/examination. This does not apply to children registering for entry to Culford School Nursery.

I/We understand that a UK domiciled Guardian must be appointed if parents of a pupil at Culford do not live permanently in the UK.

I/We request that our above-named child is registered as a prospective pupil at Culford. I/We understand that the School may request from us, process and hold personal information about our child, including sensitive information such as medical details, and I/we consent to this for the purpose of assessment and, if a place is later offered, in order to safeguard and promote the welfare of our child.

I/We accept that Culford will keep information about our child on file for educational, charitable and social purposes which may include: maintaining contact via newsletter etc; invitations to events; fundraising; and information about new opportunities or developments at Culford. All data will be securely held and processed in accordance with the DPA and Culford School's Data Protection Policy, a copy of which is available on request or may be viewed on our website: culford.co.uk

I/We enclose a cheque for the non-returnable registration fee of £100* made payable to Culford School or will arrange for payment by BACS** (please see details below).

Parent/Guardian 1 signature

Parent/Guardian 2 signature

Date

Date

Please return this completed form together with the registration fee of £100 to:

The Admissions Office,
Culford School, Bury St Edmunds, Suffolk IP28 6TX
Tel: 01284 385308 Email: admissions@culford.co.uk

* The Registration Fee is reduced to £50 for parent(s) who are Old Culfordians, if years of attendance are included overleaf.

** BACS payment details as below:

Culford School
HSBC
Sort code: 40-02-06
Account number: 80010030
IBAN: GB11HBUK40020680010030
BIC 11: HBUKGB4110E Please use your child's name as a reference.

Bank Address:
HSBC,
The Peak,
333 Vauxhall Bridge Road,
Victoria London,
SW1V 1EJ
United Kingdom

FOR OFFICE USE ONLY

Date Reg Form Received

Reg Fee Received

 Cheque BACS Credit Card

Date Passport Copy Received

Date entered onto ISAMS



Culford

Culford School
Bury St Edmunds
Suffolk IP28 6TX
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culford.co.uk