

Green Heath School Registration Form



Proposed entry date:

Entry for:

Child details

Child’s Surname: _____ First Name(s): _____

Date of Birth: _____ Place of Birth: _____

Nationality: _____ Religion: _____

Age on 1st September of year of entry: _____ years _____ months Gender: Male Female

Home address (include Post Code): _____

Please tick those that apply to your child: _____ Any medical conditions/allergies _____ Learning difficulties _____
 _____ Suspended or expelled _____ Any order (Social, Attendance, etc) _____

If yes, please provide details in a confidential letter with this form.

Please provide any additional information you feel may be relevant below

Parental/Legal guardian details

Full Name(s) and Address or Addresses) _____

Home telephone/mobile numbers: _____

Business/Place of work telephone/mobile numbers: _____

Occupation(s): _____

Email(s): _____

If any, please state the name and address (including postcode) of each school (with dates) attended in the last three years, current school first, together with the name of each Headteacher and results. Please give copies of any academic reports or results.

Declaration

I/We request that the name of our above-named child be registered as a candidate for entry to the Green Heath School. I/We consent to information sharing with regards to my child for School purposes and agree to the School terms and conditions. I/We declare the information in this form to be true and to the best of our knowledge.

Signature 1: _____ Name: _____ Date: _____

Signature 2: _____ Name: _____ Date: _____

Please email this completed form to contact@greenheathschool.org.uk or by hand to the School.