

Battle Abbey SchoolSenior School Registration Form

Battle Abbey School Battle East Sussex TN33 0AD

Tel: 01424 772385 Fax: 01424 773573

1. Pupil Information

Pupil Surname:							
Pupil's Forename(s):							
	(In full and BLC	OCK CAPITALS as	s it appears on Birth	n Certificate or Passport)			
Date of Birth (dd/mm/	уууу):/		Nationality:	Go	ender:		
Place of Birth:		Ethnicity: _		Religion:			
Type of Place:	Boarding Pupil	☐ Day Pup	oil 🗆	Current Year Group:			
Proposed Entry Term:	Autumn 🗆	Spring \square	Summer \square	in Calendar Year: 20_			
Year 12 applicants only. Please provide your UCI number :							
Pupil Achiever artistic, dramatic, music			below a few of th	ne pupil's most notable a	achievements, any		
Pupil Hobbies & Interests: Please outline below a few of the pupil's hobbies, pastimes and interests:							
How did you first hear	about the scho	ol?					
Local Reputation Fri	ends \square Open D	ay 🗆 Website	e 🗆 Advert 🗆 Otl	ner (specify) \square			
	entry, who are	or have been	-	e names of any family m school, or who have pro	_		

2. Pupil Schooling Pupil's Current School: Address of Current School: Date Pupil Started at the School: _____ Name of Current Head: Current Head's Email: _____ Can Battle Abbey contact your child's current school for a reference? Yes 🗌 No 🗆 3. Right to Study in the UK Will the pupil require sponsorship from Battle Abbey for a UK study visa? Yes \square No 🗆 Please note that the appointment of a Guardian is compulsory if neither of the parent s will be accompanying the child in the UK. Guardian (if answered yes above) Company name: _____ Contact Name: _____ Telephone: ______ Email: _____ Medical and/or Confidential Information Please outline whether your child has any of the following: No \square An ongoing condition/ health problem/ allergy: Yes 🗆 A visual or hearing impairment: Yes \square No 🗆 Learning difficulties, emotional and/or social difficulties: Yes \square No 🗆 Yes □ No □ Mental Health issues: Has your child ever been excluded or suspended from any school: Yes □ No □ If you have answered yes to any of the above, please briefly outline details in the box below. (Please also enclose the most recent Education Psychologist's report, if you have one. Please also send us any relevant medical, special needs or other educational reports you may have).

Do both parents have parental responsibility for the child	1?	Yes ⊔	No □
5. Parent Information			
Full name and title of Parent 1:	Full name and title		:
Full address:			
Post Code:			
Telephone:	Telephone:		
Email:	Email:		
Occupation:	Occupation:		
Employer:	Employer:		
Do both parents agree that the child should attend Battle	e Abbey?	Yes □	No □
Is there anyone else whose consent would be required for	or enrolment? *	Yes □	No 🗆
Is it proposed that anyone other than the parents will pa	y fees? *	Yes □	No □
* If the answer to either of these questions above is Yes th	nen please give deta	ls in a cover	ing letter.
Special Circumstances:			
Please inform us in a covering letter if there are any Court responsibility; residence; contact; prohibited steps; specific parents or if either parent is an undischarged bankrupt or	c issues or periodical	payments, o	r; in relation to the
6. Registration Fee Registration fee of £120 paid online □			
Please pay directly into our bank account at NatWest.			
B.A.S. (School) Ltd Sort Code : 60-02-07			
Account No: 59696206 BIC: NWBKGB2L			

Please use your child's name as a reference and let us know the date and details of your transfer

IBAN: GB33NWBK60020759696206

7. Declaration

I/We request that the above-named child be registered as a prospective pupil. I/We understand that:

- Registration of my/our child does not constitute the offer of a place at Battle Abbey School. Offers of places are subject to availability and to the admissions requirements of the School at the time offers are made.
- The standard terms and conditions of Battle Abbey School will undergo reasonable changes from time to time as circumstances may require and will apply in all our dealings with the school.
- Battle Abbey School (through the Head, as the person responsible) may obtain, process and hold personal information about my/our child, including sensitive information such as medical details and I/we consent to this for the purposes of assessment and, if a place is later offered, in order to safeguard and promote the welfare of my/our child.
- In the event that my/our child is offered a place at Battle Abbey School, such an offer will be subject to the school's terms and conditions for the provision of educational services, which will bind me/us in the event that I/we accept the place.

First Signature:	Second Signature:
Name in Full:	Name in Full:
Relationship to child:	Relationship to child:
Date:	Date:

8. Submission

Once completed, please send this form to the Admissions office Email: admissions@battleabbeyschool.com

Postal Address: The Admissions Office, Battle Abbey School, High Street, Battle, East Sussex, TN33 0AD

9. Checklist

With your registration form please send the school the following:

- Copy of Pupils Passport (open at the identification page)
- Copy of Birth Certificate
- Recent School Reports & Certificates
- Registration Fee £120