



Battle Abbey School
Senior School Registration Form

Battle Abbey School
Battle
East Sussex
TN33 0AD

Tel: 01424 772385
registrar@battleabbeyschool.com

1. Pupil Information

Pupil Surname: _____

Pupil's Forename(s): _____

(In full and BLOCK CAPITALS as it appears on Birth Certificate or Passport)

Date of Birth (dd/mm/yyyy): ____/____/____ Nationality: _____ Gender: _____

Place of Birth: _____ Ethnicity: _____ Religion: _____

Type of Place: Boarding Pupil Day Pupil Current Year Group: _____

Proposed Entry Term: Autumn Spring Summer in Calendar Year: 20____

Year 12 applicants only. Please provide your UCI number : _____

Pupil Achievements & Skills: Please outline below a few of the pupil's most notable achievements, any artistic, dramatic, musical or sporting skills:

Pupil Hobbies & Interests: Please outline below a few of the pupil's hobbies, pastimes and interests:

How did you first hear about the school?

Local Reputation Friends Open Day Website Advert Other (specify) _____

Are there any existing connections with Battle Abbey? Please give the names of any family members attending the school or registered for entry, who are or have been employed by the school, or who have previously attended the school, and their relationship to you and your child:

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 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: _____

Address: _____

Telephone: _____ Email: _____

4. Medical and/or Confidential Information

Please outline whether your child has any of the following:

An ongoing condition/ health problem/ allergy: Yes No

A visual or hearing impairment: Yes No

Learning difficulties, emotional and/or social difficulties: Yes No

Mental Health issues: Yes No

Has your child ever been excluded or suspended from any school: Yes No

If you have answered yes to any of the above, please 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?

Yes

No

5. Parent Information

Full name and title of Parent 1:

Full name and title of Parent 2:

Full address: _____

Full address: _____

Post Code: _____

Post Code: _____

Telephone: _____

Telephone: _____

Email: _____

Email: _____

Occupation: _____

Occupation: _____

Employer: _____

Employer: _____

Do both parents agree that the child should attend Battle Abbey?

Yes

No

Is there anyone else whose consent would be required for enrolment? *

Yes

No

Is it proposed that anyone other than the parents will pay fees? *

Yes

No

* If the answer to either of these questions above is Yes then please give details in a covering letter.

Special Circumstances:

Please inform us in a covering letter if there are any Court Orders in relation to the child, for example as to parental responsibility; residence; contact; prohibited steps; specific issues or periodical payments, or; in relation to the parents or if either parent is an undischarged bankrupt or subject to an individual voluntary arrangement.

6. Registration Fee

Registration fee of £125 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

IBAN: GB33NWBK60020759696206

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

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 admissions@battleabbey.school

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**
- **Details of any special/additional needs**
- **Registration Fee £125**