

REGISTRATION FORM

CHILD'S SURNAME	DATE OF BIRTH
CHRISTIAN NAME(S) (Please underline preferred name)	NATIONALITY
PROPOSED TERM & YEAR OF ENTRY	Autumn □ Lent □ Summer □ 20
PROPOSED ENTRY YEAR GROUP	PRE-PREP: Nursery \square ; Reception \square ; Year I \square ; Year 2 \square ;
	PREP: Year 3 □ ; Year 4 □ ; Year 5 □ ; Year 6 □ ; Year 7 □ ; Year 8 □
WEEKLY BOARDING 🗆 : FLEXI-BOARDI	NG □; DAY PLACE □; BOY □; GIRL □;
NAME ANY SIBLINGS WHO ARE CURRE	ENT/FORMER PUPILS:
PRESENT SCHOOL – full address and nar	ne of Head (if applicable)
PROPOSED DESTINATION AFTER ELST	REE:
PARENTS FATHER	MOTHER
Name	
Address	
Home	
Mobile	
Email	
Profession/ Occupation	
DECLARATION If our child is accepted for entry to Elstree School in tall to give a full term's notice in writing of with	
notice, and c) to settle the school fees account by the first accounts.	day of each term. The Governors reserve the right to make a surcharge on overdue
Date Signed (Father	r)Date of Birth
Date Signed (Mothe	er)Date of Birth
(ii) A Registration Fee of t	n this registration form. £150 must accompany this form (payable via Bank Transfer to 'Elstree School Lto Account Number: 90354473).

By signing this registration form, you give consent for Elstree School to hold the above personal information for the purpose of maintaining a record of prospective pupils and their families that have registered an interest in a place at the School and so that we can maintain contact with you in order to progress the registration and to obtain a reference from the current school to assist in our legitimate assessment of the registration.

Parents are asked to keep the school fully informed about changes of address.

(iii)