



Registration Form



1. Proposed date of entry to school Year group

Child's surname

First names
(Please underline name generally used)

Date of birth dd mm year Nationality

Type of Place Preparatory School Senior School Sixth Form (Please tick one)

2. Child's present school/preschool/nursery/playgroup

Address

Head's name
As part of the entry procedure we would normally contact the Head Teacher, unless you inform us otherwise

Date of entry dd mm year

3. Has your child attended Birkdale before? Yes No

Is a sibling a current/former pupil? Yes No Name

Name of father/guardian Title Occupation

Address

Mobile no. Home telephone no.

Email Daytime emergency tel no.

Name of mother/guardian Title Occupation

Address

Mobile no. Home telephone no.

Email Daytime emergency tel no.

4. Do you wish to apply for a scholarship? (Senior School only)

S1 (Y7) Academic Music

Sixth Form Academic Music Sports

5. Is your acceptance of a place conditional on receiving a Scholarship or Bursary assistance? Yes No



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6. Name and address of person who will be paying fees, if different from overleaf

Name

Address

Telephone no.

Mobile no. Email

Relationship to pupil

7. Please provide details of any medical conditions (including allergies), learning difficulties or disabilities your child may have.

We will contact you to request further information.

8. Will your child require any specialist facilities to attend an entrance interview or take an entrance exam/test?

9. Please state religious affiliation, if any:

Mother Father

Pupil

10. How did you hear about Birkdale?

Recommendation Reputation Our website Newspaper/Magazine Advertising

If Newspaper/Magazine Advertising, please state which publication

To which other schools have you applied for a place?

Notes: Early registration is recommended. Registrations will be considered in the order they are received. Offers of places are subject to availability and the admission requirements of the School at the time offers are made. A copy of the current edition of the standard terms and conditions will be supplied on request.

Declaration

We request that our above-named child be registered as a prospective pupil. We have paid the non-returnable £35 registration fee using the method indicated below:

- Cheque payable to 'Birkdale School' enclosed
- Telephone payment (0114 266 8400) or online (www.birkdaleschool.org.uk/payments)

We understand that the standard terms and conditions of the School will undergo reasonable changes from time to time as circumstances require and will apply in all our dealings with the School. We understand also that the School (through the Head Master, as the person responsible) may obtain, process and hold personal information about our child, including sensitive information such as medical details, and 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 the child.

Signed Signed

Parent or Guardian 1 Parent or Guardian 2

Please complete all details and return with a copy of your child's birth certificate to:
The Registrar, Birkdale School, Oakholme Road, Sheffield, S10 3DH