



Farnborough Hill
Farnborough Hampshire GU14 8AT

Telephone: 01252 545197 Fax: 01252 513037

REGISTRATION FORM

(Registration and Entrance Examination Application)

1. **Surname of Your Child:**

First Names:

(Please underline the name generally used)

Date of Birth:

Nationality:

Religion:

Proposed Term and Year of Entry:

Year Group:

2. **Father's Title, Full Name, Address and Occupation:**

Daytime Telephone:

Evening Telephone:

3. **Mother's Title, Full Name, Address (if different from the above) and Occupation:**

Daytime Telephone:

Evening Telephone:

4. Address to which correspondence should be sent: Mother

Father

Other (Please give details)

5. Please mention here the names of any other members of the family attending the School or registered for entry; or any other connection with the School.

6. Please say how you first heard of the School. Was it from:

Local Reputation

Present School

Friends

Parish

Advertisement

Other (Please give details)

7. Please state the name and address of the present school (with dates):

Name of Head:

8. Please provide details (if any) of any medical condition (including allergies) learning difficulty or disability of your child and of which we should be made aware.

9. Academic Scholarships are awarded on the basis of performance in the 11+ Entrance Examinations.

Please tick below if you would like your child to be considered for one of the following if offered a place at Farnborough Hill.

Music Scholarship (worth 20% of Fees) (only available for 11+ entry)

Sporting Scholarship (worth 20% of Fees) (only available for 11+ entry)

Art and Design Scholarship (worth 20% of Fees) (only available for 11+ entry)

Bursary (normally worth up to 40% of Fees) and available for entry to all Year Groups for families needing financial assistance)

Notes

The entrance examination is held in January for entry in the following September. Registration Forms should be received at the School before the end of the preceding Christmas Term at the latest. 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 the name of our above-named child be registered as a prospective pupil. A cheque for the non-returnable registration fee of £50.00 is enclosed. 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, 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.

First Signature: **Second Signature:**

Name in full: Name in full:

Relationship to the Child: Relationship to the Child:

Date: Date:

Please return the form to: The Headmistress, Farnborough Hill, Farnborough, Hampshire GU4 8AT