SHREWSBURY SCHOOL Registration Form: Sixth Form Entry

School email



Your Child						
Surname					Воу	Girl
First names (Please underline preferred name)						
Date of Birth (dd/mm/yy)		Religion				
First Language		Nationality				
Proposed year of entry	September 20	Boarding place Day p		Day pl	ace	
Parent's details						
Father's title and names						
Occupation						
Home Address						
		Post Code				
Home Telephone		Mobile				
Email						
Mother's title and names						
Occupation						
Address (If different to above)						
``´´		Post Code				
Home telephone		Mobile				
Email						
If parents live at different add	dresses, please indicate who should receive o	orrespondence	. Mother	Fa	ther	Both
Your Child's Present	School					
Name of School						
Headteacher						
Address						
		Post Code				
Date your child joined		Telephone				

Additional information

Please mention here the names of any other members of the family attending the School or registered for entry; or any other family connection with Shrewsbury School.									
Please provide details of any medical condition, health problem or allergy affecting your child; any learning difficulty, disability, or special educational need, as well as any behavioural, emotional and/or social difficulty below or on an additional sheet.									
Please outline any special interests or hobbies of your child, for example art, music, drama, sport and give details of particular involvement in these fields.									
	My child is interested in the following 16+ Scholarship(s): (please tick)								
Academic	Music	Sport	Art	Drama					
How did you first hear of the School? (please tick)									
Reputation	Present School	Family Connect	ion Friends	Advertisement	Internet				
Agent (please specify)									
Are you registering your child at any other school(s)? (please tick Yes No									
If Yes, please list school(s).									
Notes: Offers 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 Terms and Conditions will be supplied on request.									
Declaration: I/We request that the name of our above-named child be registered as a prospective pupil. I/We understand that the 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. I/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 I/we consent to this for the purposes of assessment and, if a place is later offered, in order to safe guard and promote the welfare of the child.									
I/We have enclosed a cheque for the non-returnable registration fee of £100 made payable to Shrewsbury School. Yes									
I/We have arranged a bank transfer for the non-returnable registration fee of £100 to Shrewsbury School. Yes									
Payment details Account Name: Shrewsbury School Account Number: 56384182 Sort Code: 40 51 62 BIC Code: HAND GB22 IBAN Code: GB98HAND40516256384182									
First Signature			Second Signatur	e					
Name in full			Name in full						
Relationship to child			Relationship to chil	d					
Date			Date						
	•••••								

Admissions Office, Shrewsbury School, The Schools, Shrewsbury SY3 7BA

Telephone: +44(0)1743 280552 Fax: +44(0)1743 280559 Email: admissions@shrewsbury.org.uk

WEB Summer'15 The Governing Body of Shrewsbury School is incorporated under the Public Schools Act 1868 Registered Charity No: 528413