

BERKHAMSTED *Collegiate School*

APPLICATION FORM

Candidate's surname

Other names

(please underline the most commonly used name)

Address

..... Postcode

Telephone (*day*)..... Telephone (*evening*).....

Date of birth..... Place of birth.....

Religion.....

Father's title..... Father's occupation.....

Surname..... Forenames.....

Mother's title..... Mother's occupation.....

Surname..... Forenames.....

Parents' email address.....

Other children

Name..... Age..... Sex.....

Name..... Age..... Sex.....

Name..... Age..... Sex.....

(Underline the name(s) of any children attending or applying to attend any part of Berkhamsted Collegiate School)

Present School & address.....

.....

Head's name..... Dates of attendance.....

Previous School.....

Dates of attendance.....

Which part of the School are you applying to?.....

For entry starting when?.....

Is this your first choice school?.....

Do you wish your child to board with us? (*Age 11 and above only*).....

If they are boarding, will it be full board or weekly?.....

I hereby request admission at Berkhamsted Collegiate School for my child named above.

I confirm that I have read the School Prospectus and, if he/she is admitted, I and the child for whom admission is sought, agree to conform to the terms and regulations contained therein. I note that the registration fee of £75 (£50 for second and subsequent children), duly attached, is not refundable, whether or not this application is successful. I confirm that there is no legal constraint (e.g. a court order) on my child attending your School. My child¹ suffers from no disease or disability, and is in every respect capable of leading a normal school life, *except in so far as I have informed the School in writing.* (Delete italics as necessary.)

Signed Father..... Mother..... Date.....

This form should be signed by BOTH PARENTS. Guardian(s) to sign in place of Parents if appropriate. **t** or ward.