

PARENTAL DETAILS & STUDENT REGISTRATION FORM

Please fill out this form and return it to your child's' NEW school as soon as possible.

Pupil Information

Forename: _____ **Surname:** _____
Middle Names: _____ **Date of Birth:** _____
Gender: _____ **Telephone:** _____
Home Address: _____
Post Code: _____
Chosen Forename: _____
Language (if English is not the first language): _____
Religion: _____
Ethnic Origin: _____

Will your child stay in school for meals? Free/Paid/ Packed Lunch/ No
Any Dietary Requirements? _____
How will your child travel to school? Walk Bus Cycle Car Other.....

Siblings Currently Attending New School

1	DOB
2	DOB
3	DOB

Parent or Carers Details

Title: _____ **Forename:** _____ **Surname:** _____ **Gender:** M/F
Address: _____
Post Code: _____
Tel Home: _____ **Tel Mobile:** _____ **Tel Work:** _____
Email: _____
Relationship: Mother/Father/Step-parent/Other..... **Daily Parental Responsibility:** Yes/No
Parent Disability: Yes/No

Title: _____ **Forename:** _____ **Surname:** _____ **Gender:** M/F
Address: _____
Post Code: _____
Tel Home: _____ **Tel Mobile:** _____ **Tel Work:** _____
Email: _____
Relationship: Mother/Father/Step-parent/Other..... **Daily Parental Responsibility:** Yes/No
Parent Disability: Yes/No

Additional Contacts (if the parent or carer is unavailable)

Title: _____ **Forename:** _____ **Surname:** _____ **Gender:** M/F
Address: _____
Tel Home: _____ **Tel Mobile:** _____ **Tel Work:** _____
Email: _____
Relationship: Mother/Father/Grand-parent/Other..... **Parental Responsibility:** Yes/No
Disability: Yes/No

Title: _____ **Forename:** _____ **Surname:** _____ **Gender:** M/F
Address: _____
Tel Home: _____ **Tel Mobile:** _____ **Tel Work:** _____
Email: _____
Relationship: Mother/Father/Grand-parent/Other..... **Parental Responsibility:** Yes/No
Disability: Yes/No

School or Nursery History

Last School or Nursery Attended:

Between Dates: _____ & _____

Medical Information

Doctor/GP Name:

Surgery Address:

Telephone:

Any Medical Conditions:

Image Consent

Do you give permission for your child’s photograph or video image to be used by the school in displays, promotional or media work? Yes/No

Any Additional Support Needs (see registration form checklist for schools)

In order to provide the best level of support for your child within school, is there anything else you would wish to disclose? All information will remain confidential.

Additional support needs?

- Statement of Special Educational Needs
- Looked After Child
- Learning Support
- Attendance Support
- Sibling with Additional Needs
- Young Carer
- Health Support
- Religious Observance
- Private Fostering Arrangement
- Child of Service Personnel
- Other (please state)

Is your child involved in any ‘out of school’ activities?

- Sporting Clubs
- Activity Clubs
- Faith Groups
- Drama/Entertainment Groups
- Part-Time Work
- Voluntary Work
- Other (please state)
-
- Which Service?.....
-

Data Protection:

In order to comply with the 1998 Data Protection legislation, you are informed that the data supplied by you, or your child, in relation to your involvement with this school, both now and in the future, will be processed in confidence. The information you provide will be used for the purposes of maintaining accurate records with regard to registration and contact details. Also statistical information required by other education bodies such as a new school, Local Authority, OFSTED, and the DfE.

In order to provide effective educational services and to ensure the accuracy of the information supplied, we may share this information with other bodies, in particular, the Local Authority and Health Authority and DfE. If you have any queries about the processing of your data or would like to know what information we hold about you, please contact the Headteacher.

N.B. If requesting a copy of your data file, you should make your application in writing in accordance with the guidance available from the school and a fee is payable.

Signature:

Print Name:

Date:

Relationship to Child:

Does the person completing and signing this form have parental responsibility?

Yes No

Please return this form to your child’s new school and not the school they are leaving.