



EATON SQUARE UPPER SCHOOL
MAYFAIR

REGISTRATION FORM
Request for a place on the waiting list

Your child					
Surname of your child					
First names (underline preferred name)					
Nationality		Date of birth		Religion	
Proposed term and year of entry					
Have you registered your child's name at any other school(s) and if so, which?					
Father / legal guardian					
Title (e.g. Mr)					
Full name					
Day-time telephone		Evening		Mobile	
E-mail address					
Address (including postcode)					
Occupation					
Employer's business name and address					
Mother / legal guardian					
Title (e.g. Mrs, Ms)					
Full name					

Day-time telephone		Evening		Mobile	
E-mail address					
Address (including postcode)					
Occupation					
Employer's business name and address					
Other people with parental responsibility					
Please provide the name(s) and current address(es) of any other person with parental responsibility (i.e. legal responsibility) for the above named child. Their consent to the child attending the School will be required if an offer of a place is made.					
Title					
Full name					
Address (including postcode)					
Connections with the School					
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.					
Please indicate how you first heard of the School					
Local reputation	Present school	Friends	Advertisement		
Website	Other (please give details)				
Please state the name and address of the present school (with dates of attendance)					
Name and address of school					
Dates of attendance					
Name of Head					

Please outline any of your child's artistic, dramatic, musical or sporting skills or experience (if applicable)

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Please give an outline of your child's other hobbies or interests (if applicable)

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Please provide us with details of any medical condition, health problem or allergy affecting your child; any learning difficulty, disability, or special educational need of your child, as well as any behavioural, emotional and / or social difficulty of your child, using the attached Confidential Information form (if applicable)

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Please confirm whether your child will require sponsorship from the School in order to obtain a visa to study in the United Kingdom at this School (if applicable)

Yes	No
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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 School's *Terms and Conditions* will be supplied on request.

Declaration

I / We request that our child named above is registered as a prospective pupil.

I / We understand that the School (through the Head, as the person responsible) may obtain, process and hold personal information about me / us which may include financial information provided by me / us or by any licensed credit reference agency or information contained in any court orders, petitions or proceedings.

I / We understand that the School may also obtain, process and hold personal information about our child which may include 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.

I / We enclose the non-refundable Registration Fee of £150 together with this completed Registration form duly signed by me / us. This can be paid by cheque or bank transfer.

Cheques should be made out to Eaton Square Private Schools Ltd

Bank Account Details are as follows:

Eaton Square Private Schools Ltd
Sort code – 40 05 20
Account number - 91862154
IBAN - GB33MIDL40052091862154
BIC - MIDLGB22

Signatures of parents / legal guardians

	First parent / legal guardian	Second parent / legal guardian
Signature		
Name in full (please include all names)		
Date of birth		
Relationship to child		
Date		

Please return this form by email to: annika@eatonsquareschool.com

or by mail to:

Annika Yerushalmy
International House, 1-6 Yarmouth Place, Mayfair W1J 7BU