



# RENDCOMB COLLEGE & JUNIOR SCHOOL

## Registration Form

### Pupil's Personal Information

Full forename(s) \_\_\_\_\_ Surname \_\_\_\_\_  
*(please underline name normally used)*

Date of birth \_\_\_\_\_ Nationality \_\_\_\_\_ Religion \_\_\_\_\_ Gender M/F

Entry level    Nursery     Reception     J1     J2     J3     J4     J5     J6

Year 7 (11+)     Year 9 (13+)     Year 10 (14+)     Year 12 (16+)

Year of entry September \_\_\_\_\_

Day / Weekly Boarder/Boarder \_\_\_\_\_

**Father's** title, name and address

**Mother's** title, name and address

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Evening No \_\_\_\_\_

Evening No \_\_\_\_\_

Daytime No \_\_\_\_\_

Daytime No \_\_\_\_\_

Mobile \_\_\_\_\_

Mobile \_\_\_\_\_

Fax \_\_\_\_\_

Fax \_\_\_\_\_

Email \_\_\_\_\_

Email \_\_\_\_\_

Profession \_\_\_\_\_

Profession \_\_\_\_\_

Name and address of present school (giving dates) \_\_\_\_\_  
\_\_\_\_\_

Head's name \_\_\_\_\_ Contact no \_\_\_\_\_

Please give an outline of your child's hobbies and interests \_\_\_\_\_  
\_\_\_\_\_

Please give any information that you consider relevant (e.g. learning difficulties) \_\_\_\_\_  
\_\_\_\_\_

**Declaration by parent/Legal Guardian - we request that the above named child is registered as a prospective pupil**  
*Please note that both parents must sign this form*

Father's signature \_\_\_\_\_ Date \_\_\_\_\_

Mother's signature \_\_\_\_\_ Date \_\_\_\_\_

**One form should be completed for each pupil and returned to the Registrar with the Registration Fee of £35 per child.  
Please make cheques payable to Rendcomb College.**