



GUILDFORD HIGH SCHOOL

REGISTRATION FORM

Request for an Assessment for a Place in the School

1) Surname of Prospective Pupil:

First Name(s):

Please underline the name generally used.

Date of Birth: Nationality:

Proposed Term and Year of Entry:

Year Group on Entry: Reception (4+) Year 3 (7+) Year 7 (11+) Lower Sixth (16+)

Occasional spaces may arise in other year groups, please contact the Admissions team before registering.

Other Year Group: Discussed with Admissions team: Yes / No

Have you registered your daughter at any other school(s) and, if so, which?

.....

2) Parent One - Title, Full Name:

Address:

..... Postcode.....

Relationship to child: Occupation:

Home telephone: Work/Daytime telephone.....

Mobile: Email.....

3) Parent Two - Title, Full Name:

Address (if different from above):

..... Postcode:

Relationship to child: Occupation:

Home telephone: Work/Daytime telephone:

Mobile: Email:

4) Guardian's Title, Full Name and Address (if applicable):

(appointed under section 5 of the Children's Act 1989 by the court or by a parent with parental responsibility or by an existing guardian)

Occupation:

Details of Appointment:

Home telephone: Work/Daytime telephone:

Mobile: Email:

5) Please mention here the names of any other members of the family attending the School, registered for entry or having any other connection to the School.

6) Name and Address of the Present School (with dates):

Notes: Offers of places 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 standard terms and conditions will be supplied on request.

DECLARATION

We request that the name of our above-named child be registered as a prospective pupil. We understand that the standard 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.

Please refer to the School website for registration deadlines. Registration fees received after the deadline will not be refunded.

A **non-refundable** registration fee of £100 has been paid to the School account using the bank details below:

A non-refundable registration fee of £100 (cheque payable to Guildford High School) is enclosed.

Account name: Guildford High School

Sort code: 20-46-50 **Account:** 40434582

IBAN: GB02 BARC 2045 7740 4345 82 **SWIFT/BIC Code:** BARCGB22

PLEASE INCLUDE CHILD'S SURNAME AS A REFERENCE

We understand also that the School (through the Head, as the person responsible), and United Church Schools Trust, may obtain, process and hold personal information about our child, including 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.

First Signature:

Second Signature:

Name in Full:

Name in Full:

Relationship to Child:

Relationship to Child:

Date:

Date:

Please return Registration Form to Admissions Office, Guildford High School, London Road, Guildford, Surrey GU1 1SJ

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