KIRKHAM GRAMMAR JUNIOR AND INFANT SCHOOL

Ribby Road, Kirkham, Preston, Lancashire PR4 2BD Telephone: 01772 673222 Fax: 01772 683866

REGISTRATION FORM

1.	Surname of Your Child:						
	First Names: (Please underline the name general	erally used)			O Male O Female		
	Date of Birth:	Nation	nality:		Religion:		
2.	Type of Place: (Please tick)						
	O Infant		O	Junior			
	Proposed Term and Year of Entry:						
	Have you registered your child's name with any other school and, if so, which?						
3.	Father's Title, Full Name, Address and Occupation:						
	Daytime Telephone:				Mobile Number:		
	Evening Telephone:				Email address:		
	Pupil's home address:	O Yes	O	No			
4.	Mother's Title, Full Name, Address (if different from the above) and Occupation:						
	Daytime Telephone:				Mobile Number:		
	Evening Telephone:				Email address:		
	Pupil's home address:	O Yes	O	No			
5.	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.						
6.	Please say how you first heard of the school. Was it from: O Local reputation O Present school						
	O Friends O Advertise	ement O O	ther (Ple	ease give d	etails)		

7.	Please state the name, address and telephone number of the present school [with dates] (if applicable):					
	Name of Headteacher:					
8.	Please outline any of your child's artistic, dramatic, musical or sporting skills or experience (if applicable):					
9.	Please give details of your child's other hobbies or interests (if applicable):					
10.	Special Needs:					
	Please list any special needs, disability, medical conditions or special dietary requirements of which the schools should be aware.					
are surcurrent Privace We re Regist I/WE of I/WE	bject to availability and the admission requirement to edition of the standard terms and conditions we yellow yell	be considered in the order they are received. Offers of places ents of the school at the time offers are made. A copy of the will be supplied on request and a copy of our Data Protection LARATION be registered as a prospective pupil for the non-returnable (please tick) OR (please tick) to the account Kirkham Grammar School t Code: 01-04-84 IBAN: GB18NWBK0104847480084				
We un as circ (throu) 2018. such a	cumstances require and will apply in all our de gh the Headmistress, as the person responsible) i The school may obtain, process and hold person	f the school will undergo reasonable changes from time to time talings with the school. We understand also that the schools a data controller for the purposes of the Data Protection Ac al information about our child, including sensitive information purposes of assessment and, if a place is later offered, in order				
First s	ignature:	Second signature:				
Name	in full:	Name in full:				
Relation	onship to the child:	Relationship to the child:				
Date:		Date:				

Please return this form to: The Registrar, Kirkham Grammar School, Ribby Road, Kirkham, Preston, Lancashire PR4 2BH

> Kirkham Grammar School Registered Charity No: 1123869 and Registered Company No: 6195985