

Senior School Headmistress
Mrs Anna King MEd MA (Cantab), PGCE

Prep School Headmistress
Mrs Amélie Morgan MA BA (Hons) PGCE

NOTRE
DAME
SCHOOL



REGISTRATION FORM

Year 7 Registrations – Closing date for 2023 entry is Monday 24th October 2022
Nursery Registrations – please also complete the Nursery Session Preferences Form
Sixth Form Registrations – please also complete the Sixth Form Subjects Form

ENTRY TO THE PREP AND SENIOR SCHOOLS IS SUBJECT TO AN ASSESSMENT - ENTRY TO THE SIXTH FORM IS SUBJECT TO STIPULATED GCSE GRADES
(INTERNAL CANDIDATES: ENTRY TO THE SENIOR SCHOOL IS SUBJECT TO ASSESSMENT OF PROGRESS OVER YEARS 4 AND 5)

PUPIL DETAILS:

Forename:	Middle Name:	Legal Surname:
Preferred Forename: (known as)	Preferred Surname:	Date of Birth:
Home Address:	Tel No. - Home:	Main email contact:
Postcode:	Tel No. - Mobile:	
Religion:	Nationality:	Passport Issuing Authority (if non-EU):
First Language: (if not English)	Additional Languages: (spoken at home)	

ADMISSION DETAILS:

Expected Date of Admission:	Expected year group on entry:	Age at expected entry date:
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PRESENT SCHOOL:

School Name:	Address	Headteacher's Name:
	Postcode:	

PARENT 1 DETAILS:

Title:	Forename:	Legal Surname:	Email Address:
Tel No. Home:		Tel No. Mobile:	Occupation:
Home Address (if different from child):			
Postcode:			

PARENT 2 DETAILS:

Title:	Forename:	Title and Legal Surname:	Email Address:
Tel No. Home:		Tel No. Mobile:	Occupation:
Home Address: (if different from child/mother)			
Postcode:			

CURRENT OR PRIOR CONNECTIONS WITH NOTRE DAME SCHOOL (EG. FAMILY, SIBLINGS, PAST PUPILS ETC.):

Please give details:	
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DID YOU ATTEND ONE OF OUR OPEN DAYS?

Please circle: YES NO	If Yes, date attended:
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Please continue overleaf

LEARNING OR MEDICAL DIFFICULTY OR DISABILITY:

If your son or daughter has a Learning Difficulty or Disability or a Medical Difficulty, it is essential that you provide details please.

Does your son or daughter currently receive Learning Support at school or outside school: ☐ yes ☐ no
 Do you have documentation relating to your son or daughter's education, such as an Educational Psychologist assessment report, auditory or visual report, ECHP, or other educational, behavioural or relevant medical report? ☐ yes ☐ no
If yes to either of the above, or if there are other circumstances of which we should be aware, please give details and enclose supporting documentation.

Please use a continuation page if necessary.

HOW DID YOU FIRST HEAR ABOUT OUR SCHOOL? – PLEASE TICK

<input type="checkbox"/>	From existing pupil/parent	<input type="checkbox"/>	Advertisement – please specify:
<input type="checkbox"/>	I/we already have a pupil at the school	<input type="checkbox"/>	
<input type="checkbox"/>	Word of mouth	<input type="checkbox"/>	Other – please specify:
<input type="checkbox"/>	Signage at entrance to school	<input type="checkbox"/>	

ANY OTHER INFORMATION:

If there is any other information you would like to include, please enter below and use a continuation page if necessary:

WE WOULD LIKE TO CONTACT YOU FROM TIME TO TIME TO INFORM YOU OF SCHOOL NEWS AND UPCOMING EVENTS

I/we would like to be contacted with school news and notification of school events: ☐ yes ☐ no

I/we are happy to be contacted by: ☐ email ☐ post ☐ telephone (please tick any or all as preferred)

If subsequently you would like to opt out of these communications, please email 'Stop' to admissions@notredame.co.uk

PLEASE REFER TO OUR DATA PROTECTION POLICY ON OUR WEBSITE TO UNDERSTAND HOW WE COLLECT, USE AND PROTECT PERSONAL DATA.

PARENTS' SIGNATURES:

Name:	Signed:	Date:
Name:	Signed:	Date:

A NON-REFUNDABLE FEE IS PAYABLE ON SUBMISSION OF THIS FORM

NURSERY/PREP: £75 / SENIOR (Yrs 7 to 13): £125

NOTRE DAME SCHOOL, SORT CODE 20 92 96, A/C No. 03566692 - PLEASE MAKE CHEQUES PAYABLE TO 'NOTRE DAME SCHOOL'

ENCLOSED (PLEASE TICK AS APPLICABLE):

REGISTRATION FEE ENCLOSED ☐ / REGISTRATION FEE PAID DIRECTLY TO ACCOUNT ☐

LEARNING OR MEDICAL DIFFICULTY OR DISABILITY DOCUMENTATION ☐ CONTINUATION PAGE ☐

NURSERY SESSION PREFERENCES FORM IF APPLICABLE (PLEASE COMPLETE FOR ALL NURSERY REGISTRATIONS) ☐

SIXTH FORM SUBJECTS FORM IF APPLICABLE (PLEASE COMPLETE FOR ALL SIXTH FORM REGISTRATIONS) ☐

EQUAL OPPORTUNITIES

Please tick the appropriate description below to indicate your child's ethnic group. This information is requested to monitor compliance with the law and our equal opportunity and non-discrimination policy. It is not used during our admissions process.

WHITE

- ☐ British
☐ Irish
☐ Any other White background, please write below.

BLACK OR BLACK BRITISH

- ☐ Caribbean
☐ African
☐ Any other Black background, please write below.

ASIAN OR ASIAN BRITISH

- ☐ Indian
☐ Pakistani
☐ Bangladeshi
☐ Any other Asian background, please write below.

CHINESE

- ☐ Chinese

MIXED RACE

- ☐ White and Black Caribbean
☐ White and Black African
☐ White and Asian
☐ Any other Mixed Race background, please write below.

OTHER ETHNIC GROUP

- ☐ Any other background, please write below.

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NURSERY SESSION REQUEST FORM

AGE 3+ YEARS: YEAR-ROUND OR TERM-TIME ONLY

PUPIL DETAILS:

Forename:	Surname:	Date of Birth:
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Please confirm your Nursery sessions choices for the child named above in the boxes below. Please note that these sessions cannot be secured until the acceptance documentation and deposit have been received from you and this will be subject to the availability of places at that time. Later modifications to session choices can be made prior to your child's start date, again subject to the availability of places at that time.

Please note that a full term's notice is required for any reduction in the number of sessions attended.

REQUESTED ATTENDANCE PATTERN

- ☐ **YEAR-ROUND (48 weeks per year)**
- ☐ **TERM-TIME ONLY (34 weeks per year)**

	Standard Day 7.30am to 6.00pm	Morning Session 7.30am to 12.30pm	Afternoon Session 1.00pm to 6.00pm	Short Day 7.30am to 3.30pm
Monday				
Tuesday				
Wednesday				
Thursday				
Friday				

PLEASE INDICATE WHETHER YOU EXPECT TO USE THE GOVERNMENT'S FUNDED EARLY YEARS EDUCATION

Subject to eligibility: please see Surrey County Council/Government websites for details and to check eligibility.

- ☐ **15 Hours**
- ☐ **30 Hours**

PARENT SIGNATURE:

Name:	Signed:	Date:
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Please return to: Admissions Office, Notre Dame School, Burwood House, Cobham, KT11 1HA