

Full name of proposed pupil

Family name First name:

Boy Girl Preferred Name

Date and country of birth

Nationality Religion

First Language Second Language

Desired date of entry: September January April 20..... as a Boarding Weekly Day Pupil

Does your child have special education needs Yes No Education Psychologist's/School Report attached Y N

Does your child have any disabilities Yes No

Does your child have any long term health problems? Yes No

Any special arrangements required for interview or Entrance Exam Yes No

Name and address of present school

Telephone No Name of Head

Full name of parents, agent or guardian (delete as applicable)

Address

Tel No (Day) Tel No (Eve)

Mobile (Mother/Father)

Email address (Mother/Father)

Occupation of Father

Occupation of Mother

I enclose a cheque made payable to Box Hill School, which is a **non-refundable** registration fee. I understand that this does not imply that the above mentioned child has been accepted for entry, which shall be conditional on: interview, entrance examination where appropriate, report from the child's present school and the availability of places at the time.

Registration Fee:

UK applications £100

Overseas applications £250

Date Signature

I was recommended to Box Hill School by

A present past parent at Box Hill School

When completed, this form should be sent together with the **registration fee** and a passport sized **photograph** to Box Hill School at the address below.