

Halstead Preparatory School  
Woodham Rise,  
Woking, Surrey  
GU21 4EE

01483 772682  
registrar@halstead-school.org.uk  
halstead-school.org.uk



**HALSTEAD**

PREPARATORY SCHOOL FOR GIRLS

## REGISTRATION FORM - APPLICATION FOR ENTRANCE TO THE SCHOOL

This form should be completed and sent to the Registrar with a registration fee of £100 which is not refundable. On receipt of the form by the School, the application will be recorded. Parents will be notified when a place becomes available. The Board of Governors hereby notify the parents of prospective pupils at Halstead that a deposit of £500 will be payable upon

their firm acceptance of a place. This is returned when the pupil leaves Halstead at the end of Year 6, less any monies owing. The deposit is not returned if the pupil leaves at the end of Nursery or whilst in Nursery. The deposit is non-refundable if the prospective pupil is withdrawn prior to commencing at Halstead.

### Pupil Details

Full Name

Date of Birth

Date on which entrance is desired

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Address of Parents or legal Guardian

  
  


Home Tel. No

Siblings

Aged

Aged

Brothers

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Sisters

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Previous and Present Education/Nursery

Since

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Nationality

Country of Birth

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Religious Denomination

Ethnic Origin

Does your child require a visa to be educated in the United Kingdom?

Any further information, including any major illness, allergy, serious disability or learning difficulty the school should know.



I/We\* accept the terms and conditions stated in the prospectus and wish my/our daughter to enter Halstead Preparatory School and we understand that an offer of a place is subject to admission requirements of the School from time to time.

I/We undertake to pay the fees on or before the first day of term, in advance, and should I/we wish to remove my/our daughter will give a full term's notice in writing or, in lieu thereof, a full term's fees. A "full term" is

### Parent 1/Guardian Details

Full Name

Profession or occupation

Business Address

  
  


Telephone Number

Marital Status

### Parent 2/Guardian Details

Full Name

Profession or occupation

Business Address

  
  


Telephone Number

Marital Status

interpreted as being from the first to the last day of any one term.

I/We understand that the School may obtain, process and hold personal information about our daughter including sensitive information such as medical details and we consent to this for the purposes of the consideration of our application for a place at the School and if a place is later offered, in order to safeguard and promote the welfare of our daughter.

\*Parent 1/Guardian

Date

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\*Parent 2/Guardian

Date

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*\*In the event of one-parent/guardian families, only one signature is required.*