



Registration Form



1. Proposed date of entry to school Year group

Child's surname

First names

(Please underline name generally used)

Date of birth dd mm year Nationality

Type of Place Prep School Senior School Sixth Form (Please tick one)

2. Child's present school/preschool/nursery

Address

Head's name

As part of the entry procedure we would normally contact the Head Teacher, unless you inform us otherwise

Date of entry dd mm year

3. Has your child attended Birkdale before? Yes No

Is a sibling a current/former pupil? Yes No Name

Name of father/guardian Title Occupation

Address

Home telephone no.

Mobile no. Daytime emergency tel no.

Email

Please tick box to indicate that your child normally resides at this address

Name of mother/guardian Title Occupation

Address

Home telephone no.

Mobile no. Daytime emergency tel no.

Email

Please tick box to indicate that your child normally resides at this address

4. Do you wish to apply for a scholarship? (S1/Y7 and Sixth Form only).

Please see **Admissions Guidance** in the prospectus pack or on our website for further information about the application requirements.

| | | | | | | |
|-------------|--------------------------|--------------------------|-------|--------------------------|--------|--------------------------|
| 11+ (S1/Y7) | Academic (by invitation) | <input type="checkbox"/> | Music | <input type="checkbox"/> | Sports | <input type="checkbox"/> |
| Sixth Form | Academic | <input type="checkbox"/> | Music | <input type="checkbox"/> | Sports | <input type="checkbox"/> |



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5. Is your acceptance of a place conditional on receiving means-tested Bursary assistance? Yes No

If Yes please also submit a Bursary Application Form and supporting documentation. Please see Admissions Guidance in the prospectus pack or on our website for further information.

6. Please provide details of any medical conditions (including allergies), learning difficulties or disabilities your child may have.

We will contact you to request further information.

7. Will your child require any specialist facilities to attend an entrance interview or take an entrance exam/test?

8. Please state religious affiliation, if any:

Mother Father
Child

9. How did you hear about Birkdale?

Recommendation Our website Newspaper/Magazine Advertising Social Media

If Newspaper/Magazine Advertising, please state which publication

To which other schools have you applied for a place?

Notes: Early registration is recommended. 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 our above-named child be registered as a prospective pupil. We have paid the non-returnable £50 registration fee using the method indicated below:

- Cheque payable to 'Birkdale School' enclosed
- Card payment by telephone (0114 266 8400)
- Card payment online (www.birkdaleschool.org.uk/payments/)

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. We understand also that the School (through the Head Master, as the person responsible) 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. Privacy notices can be found here <https://www.birkdaleschool.org.uk/about-us/privacy-notice/>

Signed
Parent or Guardian 1

Signed
Parent or Guardian 2

Please complete all details and return with a photocopy of your child's birth certificate to:
The Registrar, Birkdale School, Oakholme Road, Sheffield, S10 3DH