

Registration Form

A non refundable Registration Fee of £100 made payable to Eastbourne College must accompany this Registration Form.

1. Pupil details (please use block capitals)

Surname of your child:

First names (as they appear on their passport):

Preferred name: Gender: Female Male

Date of birth:/...../..... Type of place: Boarding Day

Present school and address:

.....

.....

Proposed year group (eg Year 9): Proposed year of entry (eg 2020):

Do you have a preference for which House your child enters?:

Religion:

2. Nationality (as appears on passport): British EEA or Swiss Other (please state)

Please tick this box if you may require the School to sponsor your child for visa/immigration purposes.

3. Is your child's first language English? Yes No

4. Additional pupil details

Have you registered your child at any other school? If yes, please state which school/s.

.....

Do you or your family have any connections with children already at Eastbourne College? If yes, please give details.

.....

Please give an outline of your child's artistic, dramatic, musical or sporting skills or experience. If necessary, please continue on a separate sheet.

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.....

5. Contact details

Full name of mother:

Title: Dr / Mrs / Ms / Miss / Other: Date of birth:/...../.....

Address:

.....

..... Post code:

Is this the pupils residential address: Yes No

Occupation:

Nationality: Country of residence:

Home telephone: Work telephone:

Mobile telephone: Email address:

Full name of father:

Title: Mr / Dr / Other: Date of birth:/...../.....

Address (if different from mother):

.....

..... Post code:

Occupation:

Nationality: Country of residence:

Home telephone: Work telephone:

Mobile telephone: Email address:

If different addresses please state who is the prime contact:

If you have parental responsibility for the child in a capacity other than as a parent of the child, please state your relationship to the child.

.....

6. Does your child have any medical conditions? Yes No
If yes, please provide further details on a separate sheet

7. Does your child have any learning support requirements? Yes No
If yes, you will be asked to complete a separate form

Declaration

We (as the holders of parental responsibility) request that the above-named child be registered as a prospective pupil of the School and we have paid the non-refundable £100 registration fee (by cheque or bank transfer).

By signing the registration form we understand, accept and agree that:

1. Registration of our child as a prospective pupil does not secure our child a place at the School but does ensure that our child will be considered for selection as a pupil at the School;
2. If our child is offered a place at the School, such an offer will be subject to the School's terms and conditions for the provision of educational services which will bind us (as the holders of parental responsibility) in the event (and from the moment) that we accept the place;
3. If applicable, the School may request from our child's present school or educational institution: a) information and a reference in respect of our child; and/or b) information about any outstanding fees and/or supplemental charges;
4. The School may process any personal data about us and our child, including sensitive personal data about our child (such as medical details), for the purposes of:
 - I. administering its list of prospective pupils
 - II. its registration selection and/or admission procedures, including as set out above; and
 - III. communicating with the parents of prospective pupils about the School and generally managing relationships between the School and its prospective pupils.

Each of those with parental responsibility must sign and complete below. **In the case of only one signatory please provide a brief note**

of explanation:

First signature:

Printed name in full:

Relationship to the child: Date:/...../.....

Second signature:

Printed name in full:

Relationship to the child: Date:/...../.....

Please note that early registration is recommended. Registrations will be considered in the order they are received. Early House preference is also recommended. Offers of places are subject to availability and the admissions requirements of the College at the time. A limited number of means tested bursaries are awarded each year and a copy of the bursary policy can be found online. Copies of the current admissions policy and terms and conditions can be supplied on request and are available at www.eastbourne-college.co.uk

8. Payment details for registration fee of £100

You can enclose a cheque payable to Eastbourne College. If you wish to make an electronic payment, please clearly state the child's name on the transaction document to assist the Accounts Department with identification.

I enclose a cheque payable to Eastbourne College Yes No

I have made a bank transfer payment of £100 Yes No

Electronic bank transfer information for payment of £100 registration fee is listed below.

Please clearly state the child's name on your transfer document.

Bank Details for transferring funds:	
Account Name:	Eastbourne College (Incorporated)
Bank Address:	Lloyds Bank, 104 Terminus Road, Eastbourne, East Sussex BN21 3AH
Account No: 00058400	Sort Code: 30 92 86
Swift Code: LOYDGB21092	IBAN Code: GB37LOYD30928600058400

9. Which of the following would best describe the ethnic origin of your child? Please answer by ticking one box from the list below:

- | | |
|---|--|
| <input type="checkbox"/> Asian or Asian British Bangladeshi | <input type="checkbox"/> Any Other Mixed Background |
| <input type="checkbox"/> Asian or Asian British Indian | <input type="checkbox"/> Mixed/Dual Background White and Asian |
| <input type="checkbox"/> Asian or Asian British Pakistani | <input type="checkbox"/> Mixed/Dual Background White and Black African |
| <input type="checkbox"/> Any Other Asian Background | <input type="checkbox"/> Mixed/Dual Background White and Black Caribbean |
| <input type="checkbox"/> Black or Black British African | <input type="checkbox"/> White British |
| <input type="checkbox"/> Black or Black British Caribbean | <input type="checkbox"/> White Irish |
| <input type="checkbox"/> Any Other Black Background | <input type="checkbox"/> Any Other White Background |
| <input type="checkbox"/> Chinese | <input type="checkbox"/> Any Other Ethnic Background |

(This information is required by the Department for Education for the collection and analysis of statistical data. This information is not part of the selection process.)

10. How did you hear about Eastbourne College?

Internet search engine Prep school Family/friend recommendation OE connection

Agency Press Open Event

Other (please state):

Thank you for completing this Registration Form.

Please return the form to: Admissions, Eastbourne College, Old Wish Road, Eastbourne, East Sussex BN21 4JX
admissions@eastbourne-college.co.uk; +44 (0)1323 452323

Please contact us or visit our website www.eastbourne-college.co.uk for details of our open events and for further information.