

ST. DOMINIC'S GRAMMAR SCHOOL

GIRLS AND BOYS 4 - 18

Registration Form

Please complete and return to: St. Dominic's Grammar School, Brewood, Bargate Street, Brewood, South Staffordshire, ST19 9BA

1.	Surname of Your Child:				
	First Name(s): (Please underline the name generally used)				
	Date of Birth:	Gender:			
	Nationality:				
	Religion:	Ethnicity:			
	Proposed Entry Date:				
	Have you registered your child's name at any o	other school(s) and if so, which?			
2.	Mother's Details:				
	Title:				
	Name(s):				
	Surname:				
	Address:				
	Occupation:				
	Daytime Telephone:				
	Home Telephone:				
	Mobile:				
	E-Mail Address:				
3.	Father's Details:				
	Title:				
	Name(s):				
	Surname:				
	Address: (if different from above)				
	Occupation:				
	Daytime Telephone:				
	Home Telephone:				
	Mobile:				
	E-Mail Address:				

Please mention here the names of any other members of the family attending the School or registered

for entry; or any other connection with the School.

Present School	Friends	Advertisement (Please state where e.g. which magazine?)		
Social Media Other (Please give details)				
Please state the name and address of the present school:				
Name:				
Address:				
teacher:		Enrolment Date:		
Please give details of any known learning or physical difficulties that may require special consideration (please attach any reports):				
any of your chil	d's artistic, mu	usical or sporting skills/experience (if applicable):		
	School Other (Pleader and accepted and medical contains of any known and accepted accepted and accepted and accepted and accepted accepted and accepted accepted and accepted and accepted accepted and accepted accepted accepted accepted and accepted a	Other (Please give detail e name and address of the steacher: any medical condition, heal tails of any known learning o		

Notes:

Early registration is recommended. Registrations will be considered in the order they are received. Offers of places are subject to availability and the requirements of the School.

DECLARATION

We request that our child is registered as a prospective pupil. A payment for the non-refundable registration fee of £25 is enclosed (cheques payable to St. Dominic's Grammar School). We understand that the terms and conditions of the School will undergo reasonable changes as circumstances require.

First Signature:	Second Signature:
Name in full:	Name in full:
Relationship to Child:	Relationship to Child:
Date:	Date: