

BRIDGEWATER SCHOOL

Drywood Hall Worsley Manchester M28 2WQ Registered as a Charity: Number 1105547

Tel: 0161-794 1463 Fax: 0161-794 3519 Email: admin@bwslive.co.uk

REGISTRATION / AGREEMENT FORM FOR ENTRY

	WE THE UNDERSIGNED		[* Delete where appropriate]		
	*Father / *Guardian: Forename(s) (full names in capitals)			Surname: Date of Birth:	
	full names in capitals)		Surname: Date of Birth:		
	THE PARENTS OR GUARDIANS OF THE CHILD WHOSE DETAILS APPEAR IN SECTION A HEREBY REQUEST THAT *MY SON / *DAUGHTER / *WARD IS CONSIDERED FOR ADMITTANCE TO THE ABOVE SCHOOL ON THE TERMS SET OUT OVERLEAF IN SECTION E WHICH *WE / *I HAVE READ AND THAT ADMISSION IS DESIRED FOR:-				
1	Academic Year:		Term		
	Full Name of Child Surname: (* Boy / *Girl)		Foren	Forename(s)	
	Child's Date of Birth:	Age:	Nation	nality:	
SECTION A	Address:			Mobile: From: To: From: To: From: To:	
	*Father / *Guardian Occupation:		Current	Current Employer:	
	Work address:		Work Telephone No:		
m Z	*Mother / *Guardian Occupation:		Current Employer:		
ECTION	Work address:		Work To	Work Telephone No:	
SE(Address of Parent if different to address in Section A: Name: Address: Postcode: Telephone No: (Home). Mobile:				
SECTION C	Parent / Guardian's Religious denomination				
	Child's Religious denomination				
	Reason(s) for application for entry				



REGISTRATION / AGREEMENT FORM FOR ENTRY continued

SECTION D	IF FEES ARE TO BE PAID BY A PERSON OR P GUARDIANS IN SECTION B, PLEASE GIVE FUL	ERSONS OTHER THAN THE NAMED PARENTS / LL DETAILS:				
	Names(s): Address:					
		Mobile:				
	Occupation:	Current Employer:				
	Work Address:	Work Telephone No:				
	I THE UNDERSIGNED HEREBY DECLARE THAT I AM RESPONSIBLE AND/OR WILL PROVIDE A FULL IMDEMNITY IN RESPECT OF ALL FEES FALLING DUE AND DECLARE THAT I ACCEPT BRIDGEWATER SCHOOL'S TERMS AS SET OUT IN SECTION E WHICH I HAVE READ:					
	Signed: Date:					
SECTION E						
	1 Should my child be accepted into the School a non-refundable deposit of two hundred pounds (£200.00) will be required made payable to 'BRIDGEWATER SCHOOL'.					
	The Head reserves the right to require the removal of a pupil if in the opinion of the Head satisfactory standards of work or conduct are not maintained or if in the opinion of the Head the pupil's presence in the School is undesirable.					
	All pupils must conform to the regulations of the School. The Parents / Guardian / person responsible for school fees will in the event of his / her withdrawal under-take to give the Head a term's notice in writing or in default to pay a term's fees.					
	The signature of Parents or Guardians below constitutes acceptance of the terms and conditions stated.					
DECLARATION	WE THE UNDERSIGNED HEREBY DECLARE ON BEHALF OF MY *SON / *DAUGHTER / *WARD THAT SHOULD *HE / *SHE BE ACCEPTED AT BRIDGEWATER SCHOOL *HE / *SHE WILL CONFORM TO THE REGULATIONS AND TERMS SET OUT ABOVE WHICH WE HAVE READ					
	Signed:(* Father / *Guardian)	Signed:(*Mother / *Guardian)				
	Date:	Date:				
	EMAIL ADDRESSES (optional)	EMAIL ADDRESSES (optional)				
	*Father / * Guardian:					