

Rivington Park Independent School
Head Teacher: Mr Michael Ruaux
Telephone number: 01204 669332

SCHOOL REGISTRATION FORM

Child's surname..... Date of Birth.....

Forenames in full.....

Religion..... Proposed date of entry.....

Previous Nursery/ School Entry Yr Group.....

Parent/Guardians full name.....

Home address.....

.....

..... Postcode.....

Email address..... HomeTel No:

Mobile Tele No:

Parent/Guardians name.....

Parent/Guardians occupation.....

Work telephone number.....

Second Parent/Guardian name.....

Second Parent/Guardian occupation.....

Work telephone number.....

Please give any details of any previous or existing family connections with the school or it's nursery.....

.....

I apply for my Son/Daughter to be admitted to Rivington Park School.

I have read and accept the standard terms and conditions supplied separately with the school registration form and downloadable from the school website www.rivingtonparkschool.co.uk

SIGNATURE 1..... DATE.....

SIGNATURE2..... DATE.....

Please can both parents/guardians sign the registration form where applicable

Please return this form and your registration fee to: Rivington Park School and Nursery, Knowle House, Rivington Lane, Horwich, Bolton, BL67RX.