

Rivington Park School & Nursery

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.....
.....
.....
Email address..... Postcode.....
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.....
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I apply for my Son/Daughter to be admitted to Rivington Park School.
If He/She is accepted I understand that I must give one terms full notice of withdrawal or pay one terms notice in lieu of notice. Notice must be received in writing before 3.30pm on the last day of the school term (i.e. last day of autumn term to leave at Easter. Last day of spring term to leave for September, last day of summer term to leave for January)

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

A registration fee of £200 is enclosed.

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

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

Please can both parents/guardians sign the registration form.
Please return this form and your registration fee to: