



Barrow Hills

SCHOOL

Acceptance Form

| DETAILS OF YOUR CHILD | | | |
|---------------------------|---|----------------|--|
| Surname: | | | |
| First Names: | | | |
| | Please <u>underline</u> the name generally used | | |
| Date of Birth: (DDMMYYYY) | | Date of entry: | |

I / We accept the place which has been offered to us for my / our child (named above), on the terms of:

- the letter containing that offer together with any conditions of award attached
- this Acceptance Form
- the School's *Terms and Conditions* enclosed with the Offer Letter
- the Fees List

Cancellation rights

I / We understand that I / we may cancel this agreement at any time within 14 days of the date of acceptance only if the offer is made and accepted entirely at distance by means of post, fax or electronic communication.

Immigration status

Where applicable I / We enclose a copy of our child's passport and immigration status documentation confirming his / her right to live in the United Kingdom and study at the School. Where he / she holds a dependent visa, I / we also enclose a copy of my / our passport/s and immigration status documentation confirming my / our right to enter and live in the United Kingdom. Please see clauses 3.5 and 9.15 in the School's *Terms and Conditions*.

Declarations by the Parents / Legal Guardians

I / We declare as individuals and jointly that:

- 1 **Terms and conditions:** Before signing this acceptance form I / we have read and understood and I / we agree to the School's *Terms and Conditions* and, where appropriate, the conditions of award of a bursary or scholarship, which will undergo reasonable change from time to time. I / We have retained a copy of the School's *Terms and Conditions* with our records.
- 2 **Disclosures:** I / We have already provided in writing and will continue to provide details of any medical condition, health problem or allergy affecting my / our child; any learning

difficulty, disability, or special educational need of my / our child, as well as any behavioural, emotional and / or social difficulty of my / our child (for example, dyslexia, dyspraxia, attention deficit disorder, visual or hearing impairment or any condition requiring use of a wheelchair). I / We attach in confidence details of any relevant information received since my / our previous disclosure. Please also see clause 6.7 of the School's *Terms and Conditions*.

3 **Medical matters:** I / We have completed in confidence the School's Medical Information and Consent Form and will continue to provide all relevant information about any medical condition, health problem, or allergy which affects my / our child and / or which may prevent my / our child from taking a full part in the School's academic and games or sports curriculum, and outdoor activities.

4 **Court orders:** Where I am / we are separated or divorced I / we have informed the School of this. I / We have also disclosed all court orders or criminal proceedings in relation to my / our child and all court orders, criminal proceedings, statutory demands or bankruptcy petitions relating to either parent (including any court orders relating to financial matters). I / We will disclose any subsequent court orders, criminal proceedings, statutory demands or bankruptcy petitions to the School.

5 **Parental responsibility:** I / We both have parental responsibility (i.e. legal responsibility) for the child named above. * I / We confirm that no other person's consent is required for the child to attend the School **OR** * I / We have disclosed written consent to the child joining the School from all others with parental responsibility for the child. (* Please delete as appropriate.)

[Note: if any person signing this acceptance form does not have parental responsibility for the child please provide a brief written explanation of the relationship between that person and the child.]

Except as already provided in writing, I / we confirm that there is no other person with parental responsibility for the child named above and that no other person's consent is required for the child to attend the School.

6 **Current and previous schools:** I / We confirm that fees payable to my / our child's current and any previous schools have been paid or will be paid in full before my / our child enters the School. Except as disclosed in a confidential letter attached to this acceptance form, my / our child has not been withdrawn from or been asked to leave another school as a result of misconduct and is not under investigation and has not been convicted of any criminal offence.

7 **School fees:** I / We understand that the School may at any time make enquiries of my / our child's current or previous schools for confirmation that all sums due and owing to such school(s) have been paid. I / We understand that the School may inform any other school or educational establishment to which I / we propose sending my / our child if any Fees of this School are unpaid. I / We also understand that the School may make reasonable enquiries of relevant third parties (for example credit reference agencies) about my / our financial means in appropriate circumstances.

- 8 **Cancellation or Withdrawal:** Except where the cancellation rights described above apply or where otherwise provided in the School's *Terms and Conditions* I / we will not cancel my / our acceptance of this place or withdraw my / our child from the School without first giving a Term's Written Notice or paying a Term's Fees in accordance with the School's *Terms and Conditions*. Please see Section 9 of the School's *Terms and Conditions* for further information about Notice, Cancellation and Withdrawal.
- 9 **Documents:** I / We confirm that before signing this acceptance form, I / we have seen or had an opportunity to see all the documents referred to in the School's *Terms and Conditions*, including the Fees List and Conditions of Award.
- 10 **Confirmation of declarations:** I / We confirm that the declarations made on this acceptance form are true and that I / we have disclosed all information required in the declarations. I / We understand and agree that the School has the right to terminate this contract for educational services immediately if any declaration is found to be untrue.

Authorities given by the Parents / Legal Guardians

I / We give the following express authorities on behalf of myself / ourselves and (so far as I am / we are entitled to do so) on behalf of my / our child.

- 11 **Commencement of services:** I / We consent to the School providing educational services to my /our child if s/he starts as a pupil at the School within 14 days of the date of this Acceptance Form.
- 12 **Educational visits:** I / We consent to my / our child taking part in all educational visits and activities which take place off school premises while s/he is a pupil at the School.
- 13 **Transport:** I / We consent to the Pupil travelling by any form of public transport and / or in a motor vehicle driven by a responsible adult who is duly licensed and insured to drive a vehicle of that type.
- 14 **Surrey Early Years' Requirement for Nursery Entry:** I/We give permission for the childcare provider to share information regarding my child directly with other relevant professionals. This will always be done in consultation with parents. I/We understand that information may be held electronically by the childcare provider.

How we use your information

For more information about how the School will use your information, and your child's information, please see our pupil privacy notices and our parent privacy notice.

These documents are published on the School's website.

If your child is going to enter Year 7 or above, they have the maturity to exercise their own data protection rights. Therefore please show them a copy of the pupil privacy notice and discuss it with them.

School Rules

I / We acknowledge that there are School rules which my / our child will be required to respect. Further information is available from the Headmaster's Personal Assistant.

Signatures of Parents

I / We enclose a cheque for £500 / have carried out a bank transfer being the Acceptance Deposit which will be held without payment of interest in the general account of the School in accordance with the School's *Terms and Conditions* referred to above. If you wish to pay by BAC's transfer, please use the following details quoting your child's first name and surname as the reference:

Account Name: Barrow Hills Fee Account
Account Number: 16264663
Sort Code: 16-00-15
BIC: RBOSGB2L
IBAN: GB57RBOS16001516264663

If only one person is to sign this acceptance form, please complete the contact information below for a second person who the School may contact in an emergency.

| | |
|--|--|
| Full name of second emergency contact | |
| Relationship to child | |
| Address | |
| Postcode | |
| Emergency contact telephone number | |

By signing this acceptance form You confirm that the second emergency contact has agreed to act in that capacity.

| | First parent / legal guardian | Second parent / legal guardian |
|--|--------------------------------------|---------------------------------------|
| Signature | | |
| Title (e.g. Mr, Mrs, Ms) | | |
| Name in full (please include all names) | | |
| Date of birth | | |
| Relationship to child | | |
| Telephone: Home | | |
| Telephone: Work | | |
| Telephone: Mobile | | |
| Telephone: Emergency contact (if different) | | |
| Address (including postcode) | | |

| | First parent / legal guardian | Second parent / legal guardian |
|---|--------------------------------------|---------------------------------------|
| Email address(es) To enable us to direct email appropriately please indicate which email address(es) should be marked as primary and secondary. Please also indicate which email is to be used for the fee invoices. | | |
| Primary email address | | |
| Secondary email address | | |
| Fees email address | | |
| Date | | |

Please check that you have made the appropriate deletion in Section 5 (Parental Responsibility). In the absence of any deletion the School will assume that no other person's consent is required for the child to attend the School.

Please return this form and your cheque to the Registrar together with a confidential letter addressed to the Head if there are any matters of which we ought to be aware before your child enters the School, or once here.

Bridewell Royal Hospital
Registered Charity Number: 311997