

## **Entrance Acceptance Form**

Pupil's Full Name:	
Date of Birth:	Term of Entry:
I/We enclose cash or cheque for £500 to confi son/daughter.	rm acceptance for the place offered to my/our
I/We confirm that we have read and accept the enclosed Terms and Conditions.	
I/We agree that we shall be jointly and severally liable for all the fees due.	
(please delete as necessary)	
Relationship to pupil: 1	. Relationship to pupil: 2
Names of Parents / Guardians:	
1	2
Signatures of Parents/Guardians. Both to sign:	
1	2
Date:	Date
Address:	Address

## **Notes**

Fees are due in **full payment** on or before the first day of term.

Deposits will only be refunded in accordance with our Terms and Conditions.

It is a requirement that all forms, <u>including the medical form</u>, are fully completed prior to your child entering the school. Failure to complete these forms will delay your child from starting at the school.