

Registration Form

Parents are asked to complete this form and return it to the Admissions Office using the details given at the end of the form.

To help us process your child's application, we will need some personal information (data) about you and your child – for example, your name and contact details, and information about your child's schooling to date. We take your privacy seriously and your data is held securely, in line with our Privacy Policy. You can read the policy on our website at http://www.bloxhamschool.com/parents-area/data-protection.html. Please email the Admissions Team if you have any further questions.

Information which is mandatory for you to provide is indicated below by a *.

If you do not complete the mandatory sections in full this may jeopardise or delay your application.

Registration Details

*Child's Surnar	ne:			
(Please underlin	e the preferred name)			
Name by which	child is known if different from above: _			
Date of Birth (d	d/mm/yyyy):	Place of Birth	:	
Nationality:		Religion:		
(Please enclose	copy of passport for verification)			
*Proposed Entry Date (Term):		(Year) 20:		
*TYPE OF PLAC Please note: If j Third Form (Yea	oining at First Form (Year 7), please ensu	re you also sp	ecify the type of pl	ace you will require for
Years 7 & 8	Lower School (First and Second Form)	Boarder	Day Boarder	Day House
Years 9 & 11	Senior School (Third to Fifth Form)	Boarder	Day Boarder	Day House
Years 12 & 13	Sixth Form (Lower and Upper Sixth)	Boarder	Day Boarder	Day House
Have you regis	tered your child's name at any other scho	ool(s) and if so,	, which?	





Bursaries

We recognise the significant commitment parents make in sending their child to Bloxham and that in some cases financial assistance may be required. We have a limited bursary fund which we are pleased to make available to parents through a means tested bursary application. Forces Bursaries are available to those parents registered to be paying the fees and who are not in receipt of a Continuity of Education Allowance (CEA) or a similar employment related award. Please tick this box if you require a bursary application form Please tick this box if you require a Forces Bursary application form **Scholarships** Please tick these boxes if you are interested in the following scholarships: ☐ Music ☐ Art ☐ DT ☐ Drama ☐ Sport** ☐ Academic ** Scholarship not offered at 11+ **Contact Details First Signatory** *Title and full name: _____ *Relationship to child: Employer's business name and address: ____ *Connection with school (please tick): Old Bloxhamist? Yes No Sibling(s) at Bloxham? Yes No *Daytime number: _____ *Evening Telephone: _____ *Mobile number: _____ *Email:_____





Contact Details continued

Second Signatory	
*Title and full name:	
*Relationship to child:	
*Address:	
	Postcode:
Occupation:	
Employer's business name and address:	
*Connection with school (please tick): Old Bloxhamist?	Yes No Sibling(s) at Bloxham? Yes No
*Daytime number:	*Evening Telephone:
*Mobile number:	*Email:
Other people with Parental Responsibility Please provide the name(s) and current address(es) of any or responsibility) for the above named child. This may be a legattending the school will be required if an offer of a place is	gal guardian or step parent and their consent to the child
Full Name:	Title:
Address:	
Child's home address: (If different to above):	
Name and dates of birth of child's siblings and their sch	nool:
Is the child subject to any court order? Yes No (Pall f yes, please provide details on a separate sheet.	lease tick)
If someone other than the first and second signatories i	s to pay the school fees for your child, please provide
below their full name and address and their relationship	o to your child:





Education Details

Child's current school:
Headteacher's name:
School Address:
Postcode:
Please outline any of your child's artistic, dramatic or sporting skills and experience (if applicable)
Please give an outline of your child's other hobbies or interests (if applicable)
Please provide us with details of any medical condition (including allergies) or disabilities of your child
If your child has any learning support requirements or access arrangements, please provide details
Does your child have an Educational Psychologist's report? Yes No Report Attached (Please tick)
For the school's own records, please give details of how you heard about Bloxham School





Overseas Students

Once completed, please return this form to the Admissions Office at Bloxham School with the £200 Registration Fee to: Admissions Office, Bloxham School, Banbury Road, Bloxham, Banbury, Oxfordshire, OX15 4PE.

I will be paying the non-refundable £200 Registration Fee by cheque/ BACS transfer (please delete as appropriate).

Cheques should be made payable to Bloxham School and should have the child's name written on the reverse.

If paying by BACS transfer, use the details below.

Please use your child's name as the reference so that we can identify your payment.

Bank: Barclays Bank PLC

Branch London Corporate Banking

Sort Code: 20 65 82

Account: Bloxham School Limited Account Number: 60796603

IBAN: GB45 BARC2065 8260 7966 03

SWIFTBIC: BARCGB22

Notes: Early registration is recommended. Offers of places are subject to availability and the admission requirements of the school at the time offers are made. A copy of the current standard terms and conditions is available on request.

Please note: the following policies, along with our latest public examination results, school rules and regulations and most recent ISI inspection report, are available on request from the school office: Anti-Bullying, Complaints, Curriculum, English as an Additional Language, First Aid, Health & Safety, Learning Support Policy, Promoting Positive Behaviour, Safeguarding, Safer Recruitment and Staff Code of Conduct.

