



TERRA NOVA  
SCHOOL

# REGISTRATION FORM

## YEAR GROUP OF ENTRY

**EYFS:**            **Upper Nursery**     **Lower Nursery**             **Reception**   
**Juniors:**            **Year 1**             **Year 2**             **Year 3**             **Year 4**   
**Seniors**            **Year 5**             **Year 6**             **Year 7**             **Year 8**

Proposed Year and month of entry (if known): \_\_\_\_\_

Current School Year: \_\_\_\_\_

## PUPIL DETAILS (Please complete in CAPITALS)

Surname of pupil: \_\_\_\_\_ Gender: \_\_\_\_\_

Forename(s) of pupil: \_\_\_\_\_ Date of birth:    /    /

Birthplace (city/country): \_\_\_\_\_ Nationality: \_\_\_\_\_

Country of residence: \_\_\_\_\_ Language(s) \_\_\_\_\_

Ethnic Category: \_\_\_\_\_ Religion (if applicable): \_\_\_\_\_

*The school is currently a registered Tier 4 sponsor. Please tick this box if you require sponsorship for visa/immigration purposes. The school reserves full discretion over any decision whether or not to sponsor your child.*

Home address: \_\_\_\_\_

Telephone number: \_\_\_\_\_ Email: \_\_\_\_\_

## PARENT DETAILS

Father/Guardian	Correspondence	Pupil Home Address	Parental Responsibility	Mother/Guardian	Correspondence	Pupil Home Address	Parental Responsibility
Please Tick	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Please Tick	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Title: Mr / Dr / Prof				Title: Mrs / Miss/ Ms / Dr / Prof			
Surname: _____				Surname: _____			
Forename: _____				Forename: _____			
Occupation: _____				Occupation: _____			
Home address: _____				Home address: _____			
Telephone number: _____				Telephone number: _____			
Email: _____				Email: _____			

If parents are separated who has legal custody of the child? \_\_\_\_\_

## PRESENT SCHOOL

Name of present school: \_\_\_\_\_ Date started: \_\_\_\_\_

Address of present school: \_\_\_\_\_

Telephone number: \_\_\_\_\_

Name of Head at present school: \_\_\_\_\_

Have you applied/or intend to apply at any other school(s) and if so, which?

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Did you attend our open events? Yes  No

Has any previous applications been made to the school Yes  No

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If yes, please give details:

Are there any other family connections with Terra Nova School (eg. brother or sister at TN)

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I wish my child to be considered for the following reasons:

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Please mention your child's particular interests, hobbies or talents (eg. sports, music, art).

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Please mention below any medical problems or specific learning difficulties of which the school should be aware:

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Please find enclosed

A copy of my child's birth certificate and or passport  A copy of my child's residence permit (if applicable)

Registration fee £75

**A/C name:** Terra Nova School Trust Ltd      **Sort Code:** 01-08-38      **A/C Number:** 32532660

**Please note that we are unable to accept cash payments.**

**We will be unable to process your application if the above items are not enclosed.**

**How did you find out about Terra Nova School:**

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**I/we confirm that we are happy for Terra Nova School to contact our child's**

**Current school for a reference upon receipt of the completed registration form.      Yes  No**

**Signature of Father/Guardian x**

**Date:**

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**Signature of Mother/Guardian x**

**Date:**

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**If this application is signed by ONE parent only, please state the reason in a covering letter. Please return the completed form to: The Admissions Team, Terra Nova School, Jodrell Bank, CW4 8AL or email [admissions@tnschool.co.uk](mailto:admissions@tnschool.co.uk)**

How will we use the information provided in this form: The information contained in this form will be used by the School during the admissions process in order to manage your application for a place at the School. All information will be used, processed and retained in accordance with our Data Protection Policy.

### Office Use Only

iSAMS  Date: \_\_\_\_\_ Assessment  Date: \_\_\_\_\_ Place Offered  Date: \_\_\_\_\_ Acceptance Received  Date: \_\_\_\_\_

On Roll  Date: \_\_\_\_\_