

# REGISTRATION FORM

Year of entry (*office use only*)

Left in \_\_\_\_\_



## FRANCIS HOLLAND SCHOOL

SLOANE SQUARE SW1

**39 Graham Terrace LONDON SW1W 8JF**

Tel: 020 7730 2971 Fax: 020 7823 4066 Email: [office@fhs-sw1.org.uk](mailto:office@fhs-sw1.org.uk)

Please complete in BLOCK CAPITALS and return to the Registrar

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### CANDIDATE FOR ADMISSION in Autumn Term 20.....

Family name: ..... Given names: .....

Date of birth: .....(dd).....(mm).....(yy) Nationality: .....

Religion: .....

Present School: .....

Address of School: .....

.....

School contact number: .....

Email address: ..... Headteacher: .....

When at School resident with Parents/Mother/Father/Guardian (*please delete*)

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### PARENTS/GUARDIAN

Father/Guardian

Mother

Title, Name & Initials: ..... .....

Profession: ..... .....

Home Address: .....

.....

Postcode: ..... Home telephone number: .....

Mother daytime contact number: ..... Email address.....

Father daytime contact number: ..... Email address.....

PTO...../

**ETHNIC ORIGIN OF DAUGHTER** Please give the code that most closely described her ethnic origin

<b>White</b> British 11                      Irish 12 Any other white background 19		<b>Asian or Asian British</b> Indian 31                      Pakistani 32 Bangladeshi 33 Any other Asian background 39	
<b>Black or Black British</b> Caribbean 21 African 22 Any other black background 29		<b>Mixed</b> White & Black Caribbean 41 White and Black African 42 White and Asian 42 Any other mixed background 49	
<b>Chinese</b> 34	<b>Any other ethnic Background</b> 80	<b>Ethnic Background Unknown</b> 0	

Language spoken at home if not English .....

The information requested is to ensure that we comply with our Equal Opportunities Policy and is NOT part of our Admissions Procedure. *Please circle the most appropriate code above.*

**If applicable**, please provide brief details of any disability, special educational need or medical conditions. We will contact you again for further information. If none, state "none".

**SCHOOL BILLS**

**DIRECT DEBIT INFORMATION**

The Bursar recommends that school fees are paid by direct debit, either through a termly payment which attracts a £50 prompt payment discount, or 10 payments per year commencing in August. Details will be provided once your daughter has been offered and accepted a place.

Address for school bills (*if different from overleaf*).....  
 .....

**Signatures of Parents (*joint responsibility*)** .....

**or Guardian responsible for payment of school bills** .....

I, the undersigned, being the parent/guardian of the above candidate, apply for her admission to the School. I have received a copy of the School Prospectus and I accept the terms and conditions contained therein, and agree to comply with the rules of the School if my daughter/ward is accepted for admission.

In particular, I understand that a full term's notice of the intention to withdraw a pupil must be given in writing to the Headmistress, and in default of the notice a Without Due Notice fee is payable.

I enclose a cheque for **£100 or £150 as I am resident overseas (made payable to Francis Holland School)** in respect of the Registration Fee. **Please note that the Registration Fee is non-refundable.**

**Signed:** ..... **Date:** .....