

Registration Form

Pupil Details								
First Name								
Middle Name(s)								
Surname								
Preferred First Name								
Date of Birth								
Gender (tick)		Male ☐ Female ☐ Prefer not to say ☐						
Proposed Date of Entry	Proposed Date of Entry							
Current School								
Type of Attendance at Mount Kelly (tick)		Boarding Wee	ekly Bo	parding Day Day				
Please attach a conv of th	ne ID n			passport and their birth certificate.				
r lease attach a copy of th	іс ів р	age of the applicant 3 ct	arront	passport and their birth certificate.				
Biological Parents Details		Biological Father		Biological Mother				
Title	Mr [☐ Dr ☐		Mrs □ Miss □ Ms □ Dr □ Other □				
	Oth	ner 🗆		Other				
Name	Oth	ner		Other				
Name Mobile Number	Oth	ner		Other				
	Oth	ner		Other				
Mobile Number	Oth	ner		Other				
Mobile Number Home Phone Number	Oth	ner		Other				
Mobile Number Home Phone Number Daytime/Work Number	Oth	ner		Other				
Mobile Number Home Phone Number Daytime/Work Number Email	Oth	ner						
Mobile Number Home Phone Number Daytime/Work Number Email Home Address	Oth	ner						
Mobile Number Home Phone Number Daytime/Work Number Email Home Address Street	Oth	ner						
Mobile Number Home Phone Number Daytime/Work Number Email Home Address Street Town	Oth	ner						
Mobile Number Home Phone Number Daytime/Work Number Email Home Address Street Town County	Oth	ner						
Mobile Number Home Phone Number Daytime/Work Number Email Home Address Street Town County Post Code	Oth	ner						

Additional Information	
_	dditional educational or emotional support that your child needs at any relevant information may result in the offer of a place being
Educational/Learning Support	Yes/No (If yes please give details and attach relevant paperwork)
Emotional/Wellbeing Support	Yes/No (If yes please give details and attach relevant paperwork)

- (1) No boy or girl will be admitted without evidence of good conduct from his/her present school.
- (2) Mount Kelly reserves the right to make necessary enquiries in order to prevent criminal activity. Any suspicions will be reported to the relevant authority under the Proceeds of Crime Act 2002, Terrorism Act 2000 and the Money Laundering Regulations 2007.
- (3) Parents must as soon as possible disclose any known or suspected circumstances relating to their child's social, emotional and mental health, development, behaviour, allergies, disabilities or learning difficulties. Any child protection issues or reports should also be fully disclosed. Should an undisclosed condition or issue subsequently become apparent, and the School cannot fully meet the needs of the pupil, or current pupils may be at risk as a result, parents may be required to withdraw the child from the School
- (4) The Head Master may at any time require the removal of a pupil if, in his opinion, it is in the best interests of the boy/girl, or of other pupils, or of the School, that he/she should leave.
- (5) Payment for all pupils must be made on or before the first day of each term. All correspondence concerning fees should be addressed to the Director of Finance at fees@mountkelly.com. Details of fees may be found on the website www.mountkelly.com
- (6) A full term's notice of the withdrawal of a boy or girl must be given in writing to the Head Master. Failing such notice a full term's fees are payable.
- (7) A guardian must be appointed for all overseas pupils, please ask for a copy of the School's Guardianship Policy for details.
- (8) This form should be sent to the Admissions Manager with the Registration Fee of £150 (if a second child is registered at the same time, the joint registration fee remains at £150). Payment may be made by cheque, made payable to Mount Kelly Foundation, or by direct transfer:

NatWest Bank, Tavistock Branch, Bedford Square, Tavistock, Devon, PL19 0AQ, UK

IBAN: GB56NWBK60214932106211

Swift Code: NWBKGB2L Sort Code: 60-21-49 Account number: 32106211

Account name: Mount Kelly Foundation

Reference: <u>Please ensure that the pupil's name is given as reference</u>

(8) All correspondence about entries should be addressed to the Director of Admissions. Telephone 01822-813193 Fax 01822 813168 or admissions@mountkelly.com

We/I have read and fully accept the conditions outlined above.

The	information	on thi	s form	will	be	processed	and	stored	electronically	for	administrative	and	marketing
purp	oses in acco	ordance	e with t	he So	cho	ol's Privacy	Poli	cy.					

Signed:	Date:	·
Signed:	Date:	