



Surname of Daughter Date of Birth.....

First Name(s) Age at Entrance.....

Home Address..... Nationality.....

..... Is English the 1st Language? Y/N

Post Code..... Home Tel No.....

Father's Full Name..... Daytime Tel No.....

Father's Address..... Mobile Tel No.....

Occupation..... E-mail Address.....

Mother's Full Name..... Daytime Tel No.....

Mother's Address..... Mobile Tel No.....
(if different from above)

Occupation..... E-mail Address.....

If parents are separated, with whom should the school communicate?.....

Is there joint parental responsibility?.....

Present school of child (if applicable).....

Address..... Tel Number.....

Please provide us with written details of any medical condition, learning difficulty or disability of your daughter of which we should be aware. The requirement to provide this information shall continue until such time as any offer of a place at Braeside is accepted by

you

.....

Date of required entry (September).....

Relationship to present/past Braeside pupils, if applicable

Name of Relative..... Relationship.....

Have you registered your daughter with any other school? If so, which school?

.....

Please return this form to the Admissions Secretary at the address below, together with the registration fee of £50. Please note your daughter is not registered until we receive the Form and Registration fee. Completion of this form does not guarantee a place.

Father's Signature..... Mother's Signature.....