

APPLICATION FOR REGISTRATION

Boy's Surname.....

First Names.....

Date of Birth.....Place of Birth.....

Details of Present School.....

Head Teacher.....Phone Number.....

School Address.....

..... Post Code.....

(A Confidential Report will be requested from the present school)

Proposed date of entry: Month.....Year.....

Full Name and Title of Parent/Guardian.....

Occupation.....

Home Address.....

.....

.....Post Code.....

Telephone (Home)..... (Work)

(Mobile).....

E-mail address.....(Should you wish to receive regular information regarding Victoria College)

DECLARATION

As the Parent/Guardian of.....

I accept the following conditions of Victoria College should a place be offered:

1. I agree to pay my son's school fees by Direct Debit in full on or before the first day of each term.
2. I agree to give a full term's notice of my intention to withdraw him and I understand that failure to do so will make me liable for payment of the full fees for the following term.
3. I accept the right of the College to recommend his withdrawal at any time, for repeated breaches of discipline, or if he should fail to maintain the necessary academic standards.
4. I accept that unless there are exceptional circumstances (which should be notified to the Headmaster as early as possible) he will not be taken out of school for family holidays.
5. I agree to co-operate with the College in every way to ensure that he abides by the standards and requirements expected of all boys.

Signature.....Date.....

**I enclose a non returnable Registration Fee of £50.00
(Cheque payable to The Treasurer of the States)**

The information you provide will be processed for the purposes of education and pastoral care in accordance with the Data Protection (Jersey) Law 2005. Further information can be obtained in the Fair Processing Statement provided by the school.

VICTORIA



COLLEGE

JERSEY

REGISTRATION FORM

When completed, please forward to

**THE HEADMASTER, VICTORIA COLLEGE,
JERSEY JE1 4HT**