

Jack & Jill School: Application for School Admission

FULL NAME OF CHILD			
First Name:		(Boy / Girl)	Surname:
Date of Birth:		Proposed Date of Entry:	
FULL NAMES OF BOTH PARENTS / GUARDIANS			
Father/Guardian		Mother/Guardian	
Full Address		Full Address	
Home Telephone		Home Telephone	
Business Telephone		Business Telephone	
Mobile Telephone		Mobile Telephone	
Email		Email	
Occupation (Father):		Occupation (Mother):	
Have any of your family previously attended Jack & Jill School?			
If yes, please name:			
FUTURE PLANS: GIRLS			
Do you wish your daughter to continue at the school until age 7?			
If not, which school will she attend?			
When do you expect her to start?		Does she have a guaranteed place?	
FUTURE PLANS: BOYS			
Which school will he attend?			
When do you expect him to start?		Does he have a guaranteed place?	
REGISTRATION (No child is accepted for less than 1 year unless by prior arrangement)			
I enclose a registration fee of £50 which I understand is non-returnable			
Signed:		(Father/Mother/Guardian) Date:	
FOR OFFICE USE ONLY			
Registration Received:		Acknowledged (Def/WL):	
L.S. Offer:	Sent:	Accepted:	Acknowledged:
U.S. Offer:	Sent:	Accepted:	Acknowledged:
Information Pack Sent:		YES / NO	Date: File:

If you have any queries, please contact the admissions secretary Mrs. Page:

Tel. 020 8898 7310

Email. twickenham@jackandjillschool.org.uk

Return completed forms to: Jack & Jill School, 20 First Cross Road, Twickenham, Middlesex TW2 5QA