

Grove Road
Houghton Regis
Bedfordshire
LU5 5PE

Telephone
01582 863516

Silver Birch Avenue
Houghton Regis
Bedfordshire
LU5 5QJ

Telephone
01582 863516



Head Teacher:
Mrs Bernice Waite
Deputy Head
Mr Chris Gunning

Email:
schooloffice@thornhillprimary.co.uk
Website: www.thornhill-primary.co.uk

'Every child is unique and at the heart of everything we do'

THORNHILL PRIMARY SCHOOL – PUPIL REGISTRATION FORM

CONFIDENTIAL

Thornhill Primary School have a legal obligation to collect certain information about your child attending our school. Please refer to our **School Privacy Notice** which details why we ask for this information, where the information is stored and to whom we share it with.

There are additional items of information which our school is specifically asking for and requires your consent. These additional items are identified in Section 4 within this form.

Please complete this form for your child and return it to the school office as soon as possible.

If you need any guidance, assistance or further clarification with completing this form, please ask a member of the school office to help you.

SECTION 1: Pupils Details

Date Completed:

First Name:	Middle Name:	Surname:
Name on birth certificate if different from current surname and previous names / surnames:		
Date of Birth:		
Asylum Seeker <input type="checkbox"/> Refugee <input type="checkbox"/>	I confirm a copy of the birth certificate will/has been provided to the school office? <input type="checkbox"/>	
Address:		
Post Code:		
Parents Email Address:		
Required Start Date (for nursery only):		
If you require 30 hours please tick : <input type="checkbox"/>		
I confirm a copy of the birth certificate will/has been provided to the school office? <input type="checkbox"/>		



Details of any siblings that have or do attend Thornhill Primary School:

Name	Date of Birth

HM Forces: Is the pupil a child of a parent or parents which serve in regular HM Forces (as a PStat Cat 1 or 2 personnel) and exercising parental responsibility and care for the pupil?
 No Yes Prefer not to say

Court Orders: Yes No not applicable

Please provide detail of any court orders applying to your child (e.g. Ward of Court, legal rights of access etc)

Previous School History

Name of School	Address	Start and Leave Dates

Has the pupil come from abroad?
 No Yes If Yes, which country?

Ethnicity

White:	British <input type="checkbox"/> Irish <input type="checkbox"/> Traveller <input type="checkbox"/> Gypsy <input type="checkbox"/> Roma <input type="checkbox"/> Other:		
Mixed:	White & Black Caribbean <input type="checkbox"/> White & Black African <input type="checkbox"/> White & Asian <input type="checkbox"/> White and Other: Mixed Other:		
Asian or Asian British:	Indian <input type="checkbox"/> Pakistani <input type="checkbox"/> Bangladeshi <input type="checkbox"/> Chinese <input type="checkbox"/> Any Other Asian Background:		
Black or Black British:	Caribbean <input type="checkbox"/> African <input type="checkbox"/> Any Other Black Background:		
Any Other Ethnic Group:			Information Withheld <input type="checkbox"/>
First Language:		Nationality:	
Language Spoken at Home:			
Additional Language(s):		Country of birth:	
Religion:			

SECTION 2 Emergency Contact Information



This information is required to allow the school to manage your child's safety, well being and to contact you when needed in cases of emergency.

As the main parent/carer completing this form, **please ask for the permission of all other contacts for their details to be included in this section.** The school will act on the information provided.

Please **enter contact details in the order you wish them to be contacted** in the event of an emergency. You can enter up to three individual contacts.

Daytime Emergency Contact (at least 2 are required)

	Name	Relationship to child	Address	Home Tel No	Mobile No *
1					
2					
3					

* We have in school a texting service to contact parents of any school closures or events. The text will be sent to the mobile number of the 1st point of contact.

SECTION 3: - Medical and Health Information of Pupil

Name of Doctor and Address of Surgery:	
Immunisations: Complete <input type="checkbox"/> Some <input type="checkbox"/> None <input type="checkbox"/>	Date of Tetanus:

Please tick if any of the following apply:		
Hearing Difficulties <input type="checkbox"/>	Sight Difficulties <input type="checkbox"/>	Are glasses worn? Y or N
Speech Difficulties <input type="checkbox"/>	Asthma <input type="checkbox"/>	Diabetes <input type="checkbox"/>
Allergies (such as Nuts / Penicillin / Plasters / Stings):		
Does your child have an epi pen? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Do you give permission for the school to contact the Doctor in an emergency <input type="checkbox"/> Yes <input type="checkbox"/> No		
Do you give permission for the school to administer first aid in an emergency <input type="checkbox"/> Yes <input type="checkbox"/> No		
Medical Conditions:		
Does your child have any medical conditions that the school should be aware of? <input type="checkbox"/> Yes <input type="checkbox"/> No		
If yes please give details of the condition and any emergency procedures that need to be followed:		



Additional or special educational needs

Does your child have a special need (SEN)? Yes <input type="checkbox"/> No <input type="checkbox"/>	If yes, please add further information:
Please advise if there are any other agencies involved with your child?	If yes, please add further information:

Dinner Arrangements

Universal Free School Meals Yr R - 2 <input type="checkbox"/>	Free School Meals <input type="checkbox"/>	Packed Lunch <input type="checkbox"/>	Paid Lunch <input type="checkbox"/>
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Dietary Needs

Please tick if any of the following apply:

Artificial Colouring Allergy <input type="checkbox"/>	No Nuts <input type="checkbox"/>	No Dairy Produce <input type="checkbox"/>
Seafood Allergy <input type="checkbox"/>	No Pork <input type="checkbox"/>	No Fish <input type="checkbox"/>
Gluten Free <input type="checkbox"/> (Medical evidence must be provided)	No Chicken <input type="checkbox"/>	Vegetarian <input type="checkbox"/>

Other: Please Specify

Mode of Travel

Walk <input type="checkbox"/>	Public Bus Service <input type="checkbox"/>	Taxi <input type="checkbox"/>
Car / Van <input type="checkbox"/>	Cycle <input type="checkbox"/>	Other <input type="checkbox"/>

SECTION 4

Permissions

1. Internet Use I give permission for my child to use the internet as part of their learning. I have read the E-Safety Acceptable User Police Agreement for Parents and also a separate agreement for EYFS/KS1 or KS2 and returned to the school. I agree that my child will adhere to the rules. Yes I agree <input type="checkbox"/> No I do not agree <input type="checkbox"/>

2. Agreement between Home and School I have read the Home School Agreement sheet and understand how we will work together.



Yes I agree

No I do not agree

3.

School Trips

We encourage our pupils to visit places of interest. Sometimes these trips are local and sometimes further away. These visits generally take place in school time and on such occasions, you will be informed by letter or in the the home school book in advance of the visit. If there is a visit, which you do not want your child to take part in, please inform the school. I give permission for my child to take part in school visits to places of interest.

Yes I agree

No I do not agree

4.

Use of Photograph & Video Consent

PHOTOS & VIDEO CONSENT

We like to record the progress our pupils make by using photos and sometimes video clips. This can cover all areas of the curriculum including school trips, class activities and PE lessons. Some of these photos are included on our website, social media such as twitter and facebook.

Please tick these boxes to say that you are happy for your child's image to be used in the following ways:

1. I agree to my childs image, in printed publicity or promotional literature produced by the school, including leaflets, posters, newsletters, prospectus and other display material?
Yes No
2. I agree to my child's class or group photograph being distributed outside of the school i.e. to other parents of pupils within your child's class or group. PLEASE NOTE if you do not give permission then your child will not be included in class or group photographs.
Yes No
3. I agree to my child's image being taken by our school photographer for individual and class photographs?
Yes No
4. I agree to my child's image being displayed on our school website?
Yes No
5. We regularly send publicity material about our services, including photographs where appropriate, to the news media, especially local press. I agree to my child's photograph being used in this way?
Yes No
6. I understand that the school monitors external areas of the school with CCTV camera. Images of my child will be held on CCTV Recordings. Please read our CCTV Policy on the school website. I agree to my child image being held for CCTV as described in the CCTV Policy.
Yes No



7. I agree to my child being photographed and images shared on social media whilst participating in school events.
Yes No
8. May we record your child's image (unidentified) on video or webcam e.g. for end of term videos and virtual performances? (please note to display videos on the website, we have to post them to a YouTube account for the school).
Yes No

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- This form is valid for six years.
 - If we use photographs we will not use their name in the accompanying text or caption. We may use group photographs with various captions.
 - We will not include personal details such as telephone numbers or addresses in any of our publications.
 - Please note that websites can be viewed throughout the world and not just in the UK where UK law applies.

Yes I agree

No I do not agree

6.

Privacy Notices

I understand that the schools Privacy Notices are available on the school website and can request a copy from the School Office.

By reading these notices, I understand:

- Thornhill Primary School has a legal and legitimate interest to collect and process my personal data in order to meet statutory requirements.
- How my data is used.
- Thornhill Primary School may share my data with the DfE, and subsequently the LA.
- Thornhill Primary School will not share my data to any other third parties without my consent, unless the law requires the school to do so.
- Thornhill Primary School will always ask for explicit consent where this is required, and I must provide this consent if I agree to the data being processed.
- My data is retained in line with the school's GDPR Data Protection Policy.
- My rights to the processing of my personal data. Where I can find out more information about the processing of my personal data

5.

School Performances

Any photograph or videos that are taken on the school grounds, including school performances, are used for family use and must not be published in any websites without the direct permission of the Head of School.



6.

Physical Education and Swimming

All jewellery must be removed before both P.E. and swimming lessons.

This includes earrings, sleepers, studs.

For children who have just had their ears pierced please cover with sticking plaster or similar, provided from home, for the first six weeks.

Thank you for taking the time to complete this form.

The information collected in this form will be kept confidential and safe. We will from time to time check these details with you to ensure that we have the latest information.

Please ensure that you inform us of any changes to these details, in particular, contact telephone numbers as we use these to communicate with our parents/carers on a regular basis.

Please read the **School Privacy Notice** regarding how we keep information secure, how we use it and who we share it with and also information about your rights of access to this information.

Once you have read the **School Privacy Notice** which is displayed on our school website, please complete the final section – Parent/ Carer Declaration Section 5

Section 5 Parent/ Carer Declaration

(SECTION 1) Personal Details of Pupil

The personal information provided is under the legal obligation the school holds in undertaking its responsibilities.

I have completed this section and have provided accurate information relating to my child.

Signature of parent/carers _____

Print name _____ Date _____

The information provided is in the interests of safety and well being of my child and will be used by the school when appropriate and in cases of any emergency affecting my child.

I have the permission of the individuals for whom contact information has been provided and I have completed this section with accurate information relating to contact details.

Signature of parent/carers _____

Print name _____ Date _____



SECTION 3 Medical and Health information of pupil

The information provided is in the interests of safety and well being of my child whilst in the care of the school.

I have completed this section and for each item listed, I have provided accurate information for my child.

Signature of parent/carer _____

Print name _____ Date _____

(SECTION 4) Permissions

I have completed this section and for each item listed, I have given/not given consent as I have deemed appropriate for my child.

Signature of parent/carer _____

Print name _____ Date _____

I declare that the information given in this form is accurate and will endeavour to inform the school of any changes to the pupil's personal details and contact details given at the earliest opportunity.

I have read the School's Privacy Notice and understand the legal basis for the information collected in this form, how it is used and shared with third parties.

Signature of parent/carer _____

Print name _____ Date _____

