



Creche • Pre-School • Junior School
High School • A Level School

Please affix a recent
passport-size photograph of
your child here

REGISTRATION FORM

DETAILS OF CHILD

Surname of Child

Forenames (in full)

Preferred Name
(to be used in all correspondence)

Date of Birth
DD MM YY

Gender Male Female

Religious Denomination

Nationality

Home Address of Child

.....
.....

Home Telephone Number

Country of Birth

First Language/(Language Spoken at home)

Proposed year and term of entry (e.g 2019, Summer)

Accommodation Status at DIS Day Boarding Flexi Boarding

Have you a DIS Connection? Y N Parent Sibling Others

SCHOOL

Please give details of your child's current school. Please note that they may be asked to supply a confidential report as part of our admission procedure.

Current School & Address.....

.....

Attendance Date

Head Teacher's Name
(including title- Mr/Mrs/Ms/Miss/Dr/other).....
Head Teacher's Email Address
Telephone Number

DETAILS OF PARENTS/LEGAL GUARDIANS

Name of Father/Legal Guardian
Title or Rank (Where appropriate) Mr Other
Profession of Father.....
Employer's Name &
Address.....
.....
Mobile Telephone Number

Email Address
Name of Mother/Legal Guardian
Title or Rank (Where appropriate) Mrs Other
Profession of Mother

Employer's Name & Address
.....
Mobile Telephone Number

MEDICALS

Does your child have a life-threatening health condition? Yes: No:
If yes, please explain:

Does your child need medication at school? Yes: No:
If yes, please explain:

Does your child any other medical issues of which we need to be aware? Yes: No:
If yes, please explain: