



# Haberdashers' ADAMS

## Boarding Registration Form for Year 8 – 11 Entry

### “List of Interest”

Valid from September 2025 until July 2026: This application is ONLY valid for this academic year.

You MUST re-apply each academic year.

### PLEASE COMPLETE THIS FORM IN BLOCK CAPITALS ONLY

Applicant's First Name:			
Applicant's Surname:			
Date of Birth:			
Home Address: (where the applicant mainly resides)			Postcode:
Parent/ Carer Details (1):	Title:	First Name:	
	Surname:		
	Relationship to applicant:		
Parent/ Carer Details (2):	Title:	First Name:	
	Surname:		
	Relationship to applicant:		
Home Telephone Number:			Mobile Number:
Email Address:			
Name & address of present school:			
Current school year:			

#### Children in Public Care, Adopted, or Eligible for Pupil Premium:

Is your son in, or has ever been in public care? **No / Yes** (if Yes, please provide documentation)

Does your son have any SEN needs and / or has a disability under the terms of the Equality Act 2010? **No / Yes** (if Yes, please provide documentation)

Is your son adopted? **No / Yes** (if Yes, please provide documentation)

Is your son eligible for Pupil Premium? **No / Yes** (if Yes, please provide documentation)

Are you classed as a service family? **No / Yes** (if Yes, please provide documentation)

#### Parents who consider their son has a disability, under the terms of the Equality Act 2010 and/or a special educational need which would disadvantage him in the admissions process, should contact the school to request a Special Arrangements Form.

This must be returned **with** supporting evidence from relevant third parties, (e.g. specialist consultant, local authority, doctor, etc.). It is your responsibility, not the school's, to provide all relevant evidence. Please note all information must be submitted with this Registration Form so consideration can be given to any special arrangements or reasonable adjustments. If the Special Arrangements Form has not been completed and returned to the school **with** this form, NO special arrangements can be considered.

#### Confirmation:

I wish for my son to be placed on the “List of Interest” for admission this academic year, as stated above.

I confirm that I have read, understood and agree to the Admissions Policy for the current academic year, available from our website.

I confirm all of the information given on this form is correct and I understand that the inclusion of false information disqualifies the registration.

I confirm that I am happy for all the personal data to be shared with the relevant Local Authority.

Signature of Parent/Carer.....

Date: .....

**PLEASE SIGN AND RETURN THIS FORM AND SEND A COPY OF YOUR SON'S PASSPORT ALONG WITH ANY REQUIRED SUPPORTING DOCUMENTATION, TO:**

HABERDASHERS' ADAMS, ADMISSIONS, HIGH STREET, NEWPORT, SHROPSHIRE, TF10 7BD

Or email: [registrar@adamsgs.uk](mailto:registrar@adamsgs.uk)