Parents Occupation	*Father*	*Mother*

Medical Details			
Doctor's full name		Tel No.	
Address			

In the best interests of the pupil, it is important to advise the School of any disability that the pupil has and of any medical condition or other circumstances which might require the pupil to be given special assistance at the School or which you think the School should be aware. Please give details here or in separate note letter to accompany this form.
The information is processed electronically but in coded form to enable staff to respond to pupil's needs.

Additional parental contacts / Guardian details

For the purposes of the School records, pupil's parent is defined as his/her natural parent and any other person who is his/her guardian, who has custody of, or who is likely to maintain him/her.

Please add below anyone who comes into this category but who is not shown overleaf.

Relationship to pupil *(e.g. Mother, Father or Grandparent)*		
Title		
Surname		
Can be contacted in an emergency during the day	☐ Yes ☐ No *(please tick)*	☐ Yes ☐ No *(please tick)*
If yes give whereabouts *(e.g. at home or name of workplace)*		
Daytime Tel No		
Address		
Postcode		
Home Tel No		

I/We, being the parent/parents of or being the person/persons having parental rights in respect of the pupil:

- hereby apply for a place at Lomond School for the pupil to become a pupil at he School with effect from the admission date specified above;
- attach a non-refundable £50 Registration Fee (£25 for Nursery applicants) is attached;
- accept that this is subject to the School's admissions policy current as at the date of receipt of this application by the School as such policy is from time to time revised or amended;
- recognize there is no obligation on the School to offer a place at the School for the pupil or to accept the pupil as a pupil at the School; and
- authorise the pupil's current school to (a) confirm to the School whether all fees in respect of the pupil have been paid to the current school and (b) disclose to the School information on the pupil (e.g. academic report and pupil profile), and authorise the School to disclose this application and authorisation to that current school.

Signed……..(Parent / Guardian) Name……... Date…….

Signed……..(Parent / Guardian) Name……... Date…….