



Hampshire Collegiate Senior School

REGISTRATION FORM

If you wish to register your child for entry into HCS Senior School, please complete this form and return it by mail to The Registrar with a (non-returnable) Registration Fee of £50 per child; cheques should be made payable to "Hampshire Collegiate School". **A receipt will only be issued on request. Email copies of this form cannot be accepted.**

1. Surname of Prospective Pupil:

First Names: **Boy** **Girl**
 (Please underline the name generally used)

Date of Birth: **Nationality:** **Religion:**

Proposed Term of Entry Autumn (September) Spring (January) Summer (Mar/Apr) Year of Entry:

Year Group on Entry:
 Year 7 Year 8 Year 9 Year 10 Year 11 Year 12

Day Pupil Boarding Weekly Boarding Flexible Boarding

2. Father's Title, Full Name, Address:

.....

..... Post Code:

Occupation:

Daytime Telephone:..... Evening Telephone:.....

Mobile: Email:

This is Pupil's Home Address:

3. Mother's Title and Full Name:

Address (where different from Section 2. above):

..... Post Code:

Occupation:

Daytime Telephone: Evening Telephone:

Mobile: Email:

This is Pupil's Home Address:

