



St. Andrew's School

Application form

Child's Surname _____

Forenames _____

Date of Birth _____ Nationality _____

Religious Denomination _____

Proposed date of entry _____

Present Headteacher (if applicable):

Name _____

Address _____

_____ Postcode _____

Father's Name _____

Address _____

_____ Postcode _____

Telephone number _____

Profession or Occupation _____

Mother's Name _____

Address _____

_____ Postcode _____

Telephone number _____

Profession or Occupation _____

THE HEADMASTER
ST. ANDREW'S SCHOOL,
PANGBOURNE RG8 8QA.

Date _____

Sir,

we request that _____ may be registered as a pupil for St. Andrew's School, and we enclose the Registration Fee of £25.

(Two signatures please) _____ *Father*

_____ *Mother*