

# **ACCEPTANCE FORM**

Child's full name		
Preferred name		
Date of birth	Date of entry	

I / We accept the place which has been offered to us for my / our child (named above), on the terms of:

- the letter containing that offer
- this Acceptance Form
- the School's Terms and Conditions enclosed with the offer letter
- the School's fees list, as varied from time to time.

I / We acknowledge receipt of a copy of the current Home/School Agreement and the 'St David's School Way and Pupil Rules' which I / we have read and have drawn to my / our child's attention.

## Cancellation rights

I / We understand that I/we may cancel this agreement at any time within 14 days of the day following our receipt of this Acceptance Form only if the offer is made and accepted entirely at distance by means of post or electronic communication.

Please see our cancellation notice which is published on our website.

#### **Immigration status**

Where applicable I / we enclose a copy of my/our child's passport and immigration status documentation confirming his / her right to enter the United Kingdom and study at the School. Where he / she holds a dependent visa, I / we also enclose a copy of my / our passport(s) and immigration status documentation confirming my / our right to enter and live in the United Kingdom. Please see clauses 2.3 and 7.7 in the School's *Terms and Conditions*.

## Declarations by the signatories to this Acceptance Form

I / We declare as individuals and jointly that:

Terms and conditions: Before signing this Acceptance Form, I / we have read and understood and I / we agree to the School's *Terms and Conditions*, which will undergo reasonable change from time to time. I / We have retained a copy of the School's *Terms and Conditions* with our records.

- Disclosures: I / We have already provided and will continue to provide details of any medical condition, health problem or allergy affecting my / our child; any learning difficulty, disability, or special educational need of my / our child, as well as any behavioural, emotional and / or social difficulty of my / our child (for example dyslexia, dyspraxia, attention deficit disorder, visual or hearing). I / We attach in confidence details of any relevant information received since my / our previous disclosure.
- Medical matters: I / We will complete in confidence the School's Medical Information and Consent Form and will continue to provide all relevant information about any medical condition, health problem, or allergy which affects my / our child and / or which may prevent my / our child from taking a full part in the School's academic and games or sports curriculum, outdoor activities and educational visits or if my / our child has been in contact with anyone with an infectious or contagious disease.
- 4 **Court orders:** Where I am / we are separated or divorced, I / we have informed the School of this. I / We have also disclosed all court orders or criminal proceedings in relation to my / our child and all court orders, criminal proceedings, statutory demands or bankruptcy petitions relating to either parent (including any court orders relating to financial matters). I / We will disclose any subsequent court orders criminal proceedings, statutory demands or bankruptcy petitions to the School.
- Parental responsibility: I / We both have parental responsibility (i.e. legal responsibility) for the child named above. \* I / We confirm that no other person's consent is required for the child to attend the School OR \* I / We have disclosed written consent to the child joining the School from all others with parental responsibility for the child. (Please delete as appropriate.)

child please provide a brief written explanation of the relationship between that person and the child together with the name(s) of all others with parental responsibility for the child.

If any person signing this Acceptance Form does not have parental responsibility for the

- 6 **Current and previous schools:** I / We confirm that fees payable to my / our child's current and any previous schools have been paid or will be paid in full before my / our child enters the School. Except as disclosed in a confidential letter attached to this Acceptance Form, my / our child has not been withdrawn from or been asked to leave another school as a result of misconduct and is not under investigation and has not been convicted of any criminal offence.
- School fees: I / We understand that the School may at any time make enquiries of my / our child's current or previous schools for confirmation that all sums due and owing to such school(s) have been paid. I / We understand that the School may inform any other school or educational establishment to which I / we propose sending my / our child if any Fees of this School are unpaid. I / We also understand that the School may make reasonable enquiries of relevant third parties (for example credit reference agencies) about my / our financial means in appropriate circumstances.
- 8 **Cancellation or Withdrawal:** Except where the cancellation rights described above apply or where otherwise provided in the School's *Terms and Conditions*, I / we will not cancel my / our acceptance of this place or withdraw my / our child from the School without first giving a Term's Written Notice or paying a Term's Fees in accordance with the School's *Terms and Conditions*.

- 9 **Documents:** I / We confirm that before signing this Acceptance Form, I / we have seen or had an opportunity to see all the documents referred to in the School's *Terms and Conditions*, including the Home/School Agreement and the 'St David's School Way and Pupil Rules'.
- 10 **Confirmation of declarations:** I / We confirm that the declarations made on this Acceptance Form are true and that I / we have disclosed all information required in the declarations. I / we understand and agree that the School has the right to terminate this contract for educational services immediately if any declaration is found to be untrue.

# Authorities given by the Parents / legal guardians

I / We give the following express authorities on behalf of myself / ourselves and (so far as I am / we are entitled to do so) on behalf of my / our child.

- 11 **Commencement of services:** I / We consent to the School providing educational services to my /our child if he / she starts as a pupil at the School within 14 days of the date of this Acceptance Form.
- 12 **Educational visits:** I / We consent to my / our child taking part in all educational visits which take place off school premises while he / she is a pupil at the School.
- 13 **Transport:** I / We consent to my / our child travelling by any form of public transport and / or in a motor vehicle driven by a responsible adult who is duly licensed and insured to drive a vehicle of that type.

## How we use your information

Our privacy notice for parents sets out how we use your personal data. We also have a privacy notice for pupils. Both are enclosed with the offer letter and published on the School website: https://www.stdavidsschool.co.uk/about-us/privacy-notice/.

### Second emergency contact

If only one person is to sign this Acceptance Form, the School requires You to complete the details below for a second person who You authorise Us to contact in an emergency.

By signing this Acceptance Form you confirm that the second emergency contact has agreed to act in that capacity.

Full name	
Address	
Postcode	
Relationship to child	
Emergency contact telephone number	

#### **Signatures**

I / We have paid by bank transfer £1,000 being the Acceptance Deposit which will be held without payment of interest in the general account of the School in accordance with the School's *Terms and Conditions* referred to above.

#### **Secure Payments**

We recommend making payment via the online payment system, which you can access by using the link below. This payment method can be used to pay for school fees, registration fees, acceptance fees or other payments to the school. The online payment system is administered by Flywire and is a secure payment system that allows you to pay by debit card, credit card, or bank transfer.

#### Make Secure Payment

	First signatory	Second signatory
Signature		
Title (e.g. Mr, Mrs, Ms)		
Name in full (please include all names)		
Date of birth		
Relationship to child		
Telephone number		
Address		
Postcode		
Date		

Please make your payment (via bank transfer) and return this form to the School Office together with a confidential letter addressed to the Head if there are any additional matters of which we ought to be aware before your child enters the School, or once here.