



# Brockhampton Primary Academy

Bringsty ~ WORCESTER ~ WR6 5TD

01885 483238

Email: [office@brockhamptonschool.org](mailto:office@brockhamptonschool.org)

Website: [www.brockhamptonprimary.org](http://www.brockhamptonprimary.org)

Headteacher: Mrs Keren Finnegan

## PUPIL REGISTRATION FORM

SURNAME OF CHILD:	
FORENAMES:	PREFERRED NAME:
DATE OF BIRTH:	GENDER (M or F)
HOME ADDRESS:	
POST CODE:	
FIRST LANGUAGE:	OTHER LANGUAGE:
PREVIOUS SCHOOL/NURSERY: (inc address & phone no.)	

### DETAILS OF OTHER CHILDREN IN FAMILY

NAME	D.O.B.	SCHOOL

We need to have details of all persons who have Legal Contact and Parental Responsibility along with those who have permission to collect your child and may be contacted in the case of an emergency. A minimum of 2 contacts are required.

PLEASE START BY LISTING EACH PERSON WHO HAS PARENTAL RESPONSIBILITY FOR YOUR CHILD	
Name (contact 1):	Name (contact 2):
Relationship to child:	Relationship to child:
Parental Responsibility: Yes/No	Parental Responsibility: Yes/No
Address:	Address:
Postcode:	Postcode:
Home Telephone:	Home Telephone:
Mobile:	Mobile:
Work:	Work:
Email Address:	Email Address:
Is this person authorised to collect your child: Yes / No	Is this person authorised to collect your child: Yes / No

FULL NAME OF OTHERS WITH PARENTAL RESPONSIBILITY	RELATIONSHIP TO CHILD	FULL ADDRESS	TEL. NUMBER
(Mr. Mrs. Miss. Ms)			
(Mr. Mrs. Miss. Ms.)			

Who does the child normally live with? .....

Are there any issues surrounding legal contact? Yes/No

If yes, please provide details on a separate sheet of paper. This will help us to safeguard your child at all times.

**ADDITIONAL CONTACTS**

Name of any additional people who have permission to collect your child regularly and who may be contacted in an emergency.

FULL NAME	RELATIONSHIP TO CHILD	FULL ADDRESS (including postcode)	TEL. NUMBER
1.			
2.			
3.			

**BACKGROUND INFORMATION**

<b>DOCTORS NAME:</b>
<b>ADDRESS:</b> <span style="float: right;"><b>TEL NO:</b></span>
<b>MEDICAL CONDITION OF CHILD (including details of regular medication and dietary requirements):</b>
<b>DOES YOUR CHILD RECEIVE BENEFIT RELATED FREE SCHOOL MEALS: YES / NO</b>
<b>HAS A STATEMENT OF SPECIAL EDUCATIONAL NEEDS BEEN ISSUED IN RESPECT OF YOUR CHILD: YES / NO</b>
<b>RELIGION OF CHILD:</b>
<b>ANY OTHER INFORMATION WHICH MAY BE USEFUL FOR THE SCHOOL TO KNOW:</b>

## ETHNIC ORIGIN (Please tick as appropriate)

Description	Code	Tick in box
Afghan	OAFG	
African Asian	AAFR	
AKAS – Kashmiri	AKS	
Albanian	WALB	
Arab	OARA	
Asian and any other ethnic group	MAOE	
Asian and Black	MABL	
Asian and Chinese	MACH	
Bangladeshi	ABAN	
Black - Angolan	BANN	
Black - Congolese	BCON	
Black - Ghanaian	BGHA	
Black - Nigerian	BNGN	
Black - Sierra Leonian	BSLN	
Black - Somali	BSOM	
Black - Sudanese	BSUD	
Black and any other ethnic group	MBOE	
Black and Chinese	MBCH	
Black Caribbean	BCRB	
Black European	BEUR	
Black North American	BNAM	
Bosnian-Herzegovinian	WBOS	
Chinese + any other ethnic group	MCOE	
Croatian	WCRO	
Egyptian	OEGY	
Filipino	OFIL	
Greek	WGRK	
Greek Cypriot	WGRC	
Gypsy/Roma	WROM	
Hong Kong Chinese	CHKC	
Indian	AIND	
Information Not Yet Obtained	NOBT	
Iranian	OIRN	
Iraqi	OIRQ	
Italian	WITA	
Japanese	OJPN	
Kashmiri Pakistani	AKPA	
Kashmiri other	AKAO	
Korean	OKOR	
Kosovan	WKOS	
Kurdish	OKRD	
Latin/South/Central American	OLAM	
Lebanese	OLEB	
Libyan	OLIB	

Description	Code	Tick in box
Malay	OMAL	
Malaysian Chinese	CMAL	
Mirpuri Pakistani	AMPK	
Moroccan	OMRC	
Nepali	ANEP	
Other Asian	AOTA	
Other Black	BOTB	
Other Black African	BAOF	
Other Chinese	COCH	
Other ethnic group	OOEG	
Other mixed background	MOTM	
Other Pakistani	AOPK	
Other White British	WOWB	
Polynesian	OPOL	
Portuguese	WPOR	
Serbian	WSER	
Singaporean Chinese	CSNG	
Sri Lankan Other	ASRO	
Sri Lankan Sinhalese	ASNL	
Sri Lankan Tamil	ASLT	
Taiwanese	CTWN	
Thai	OTHA	
Traveller of Irish heritage	WIRT	
Turkish	WTUK	
Turkish Cypriot	WTUC	
Vietnamese	OVIE	
White	WOTW	
White – Cornish	WCOR	
White – English	WENG	
White – Irish	WIRI	
White – Scottish	WSCO	
White – Welsh	WWEL	
White + any other Asian Background	MWAO	
White and any other ethnic group	MWOE	
White and Black African	MWBA	
White and Black Caribbean	MWBC	
White and Chinese	MWCH	
White and Indian	MWAI	
White and Pakistani	MWAP	
White and Eastern European	WEEU	
White European	WEUR	
White and Western European	WWEU	
Yemeni	OYEM	

**SIGNATURE:** ..... **Date:**.....

**NAME IN BLOCK CAPITALS:** ..... **TITLE:**.....

The Black Pear Trust is the ‘data controller’. This means we are responsible for how your personal information is processed and for what purposes. The Black Pear Trust is registered as the Data Controller with the Information Commissioner’s Office (ICO); Registration Number: ZA320821 You can contact the academy trust as the Data Controller in writing at: Hollymount School, Hollymount Rd, Worcester, WR4 9SG or [office@hollymountschool.org](mailto:office@hollymountschool.org) Your data and your child’s data will be kept in a secure manner in line with the Black Pear Trust’s data retention policy. The information you provide will only be used for the stated purpose.

Under data protection law, parents and pupils have the right to request access to information about them that we hold. To make a request for your personal information, or to have access to your child’s educational record, contact the school data protection contact or the School Data Protection Officer at Warwickshire Legal Services via email at [schooldpo@warwickshire.gov.uk](mailto:schooldpo@warwickshire.gov.uk) or alternatively; School Data Protection Officer, Warwickshire Legal Services, Warwickshire County Council, Shire Hall, Market Square, Warwick, CV34 4RL.

Further information about the processing of your data can be found on The Black Pear Trust website [www.blackpeartrust.org/policies/](http://www.blackpeartrust.org/policies/)

<b>ADMISSION NO:</b> (for office use only)	<b>ADMISSION DATE:</b> (for office use only)
--------------------------------------------	----------------------------------------------