

# GREEK LANGUAGE EDUCATIONAL ESTABLISHMENT OF HERTFORDSHIRE

## GREEK SCHOOL OF POTTERS BAR

Located at:  
Oakmere J.M.I. School  
Chase Avenue  
Potters Bar  
EN6 5NP



Correspondence address:  
1 Kings Avenue  
London  
N21 3NA

[www.greekschoolpottersbar.co.uk](http://www.greekschoolpottersbar.co.uk)

### Class Fees

Registration fee.....£10/yr  
(One payment per family)  
Nursery/Reception.....£175/yr  
Year 1 - Year 3.....£205/yr  
Year 4 - Year 6.....£215/yr  
GCSE - A Level.....£275/yr  
3rd and 4th Child.....less 50%

**Please fill in this form and hand it to a member of the School Governors together with the Information Pack acknowledgement.**

**Fees can be paid in 2 instalments, one due by the fourth week of your child having started classes, the second due the first returning week in January. Any late fees will be subject to a 10% surcharge.**

Payments can be made by cash or cheque (please write the names of your children on the back of the cheque.) You will first be issued with an invoice and then a receipt upon payment.

Welcome to our thriving, happy and successful school.

## REGISTRATION FORM

School Year: 2010-2011

### Child/Children's Home Address

House Name/Number \_\_\_\_\_  
Road \_\_\_\_\_  
Town \_\_\_\_\_  
County \_\_\_\_\_ Post code \_\_\_\_\_

### Billing Address (if different to home address)

Mr/Mrs/Ms \_\_\_\_\_ Surname \_\_\_\_\_ First name \_\_\_\_\_  
House Name/Number \_\_\_\_\_  
Road \_\_\_\_\_  
Town \_\_\_\_\_  
County \_\_\_\_\_ Post code \_\_\_\_\_

Mother's surname \_\_\_\_\_ First name \_\_\_\_\_  
Tel. no. day \_\_\_\_\_ Tel. no. evening \_\_\_\_\_  
Mobile \_\_\_\_\_ Email \_\_\_\_\_

Father's surname \_\_\_\_\_ First name \_\_\_\_\_  
Tel. no. day \_\_\_\_\_ Tel. no. evening \_\_\_\_\_  
Mobile \_\_\_\_\_ Email \_\_\_\_\_

Headmaster: Mr Thrasos Nadiotis - Tel:020 8441 8185, Mobile: 07790 868075

Registered office: 1 Kings Avenue, London, N21 3NA

Charity Reg. No: 1040670

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In the event that we cannot contact either parent in an emergency, please give another person's details

Name \_\_\_\_\_ Relationship to child \_\_\_\_\_  
Tel. no \_\_\_\_\_ Mobile \_\_\_\_\_

### Students details

1. Student name \_\_\_\_\_ Date of birth \_\_\_\_\_ Class \_\_\_\_\_  
2. Student name \_\_\_\_\_ Date of birth \_\_\_\_\_ Class \_\_\_\_\_  
3. Student name \_\_\_\_\_ Date of birth \_\_\_\_\_ Class \_\_\_\_\_  
4. Student name \_\_\_\_\_ Date of birth \_\_\_\_\_ Class \_\_\_\_\_

### Child's First Language (Greek/English etc.)

Child 1 \_\_\_\_\_ 2 \_\_\_\_\_ 3 \_\_\_\_\_ 4 \_\_\_\_\_

### Previous Greek Schools Attended:

Name \_\_\_\_\_ Class \_\_\_\_\_  
Date attended \_\_\_\_\_ Reason for leaving \_\_\_\_\_

### Younger children intending to come on roll at GLEE

1. Child's name \_\_\_\_\_ Date of birth \_\_\_\_\_  
2. Child's name \_\_\_\_\_ Date of birth \_\_\_\_\_

Information Pack acknowledgement completed and returned **YES/NO**

### PLEASE NOTE:

(i) Notification must be given in writing a term in advance should your child not wish to continue at Greek School.

(ii) Should you withdraw your child/ren during the academic year without notice you are liable to pay the full annual fees and refunds will not be given\* (See information pack)

\*Notification in writing of exceptional circumstances of withdrawal during the academic year will be considered: the ultimate decision will be made by the Governing Body.

Cheques should be made payable to "GLEE of Herts" and can be handed to Governors on Saturdays, or posted to the correspondence address above.

**This information will be treated as strictly confidential.**

As parents/guardians of the above named pupils we will do our best to ensure that our child/ren should adhere to the rules laid out by the school in terms of punctuality, good behaviour and presentation and their willingness to do their best. We will offer the school our full support and commitment and endeavour to serve a minimum of 1 year on the Governing body whilst we are Members of the school

Parent/Guardian signature: \_\_\_\_\_ Date of Registration: \_\_\_\_\_

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### Medical Information and Other Details

The information given below will be treated as strictly private and confidential and will only be used in the event of a medical emergency

Childs full name \_\_\_\_\_

If you have more than one child at the school please complete a separate form for each child.

Doctor's Details: Name, address and phone no \_\_\_\_\_

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Has your child had or does he/she currently have: (Please tick below.)

- |                                                                                                    |                                                    |
|----------------------------------------------------------------------------------------------------|----------------------------------------------------|
| <input type="checkbox"/> Asthma                                                                    | <input type="checkbox"/> Hearing problems/glue ear |
| <input type="checkbox"/> Diabetes                                                                  | <input type="checkbox"/> Frequent sore throats     |
| <input type="checkbox"/> Fits/convulsions                                                          | <input type="checkbox"/> Speech problems           |
| <input type="checkbox"/> Food allergies                                                            |                                                    |
| <input type="checkbox"/> Allergic reactions (If yes, please specify cause, reaction and treatment) |                                                    |

Any other relevant information (please specify) \_\_\_\_\_

Does your child have any ongoing medical conditions that require the administration of medicine at school

YES/NO. (If yes, please give details - this includes inhalers, insulin pens etc.)

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\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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### Data Protection Act 1988 Photographs / Images of Children

May we use your child's/childrens' photograph in the school prospectus and other printed publications that we produce for promotional purposes? **YES / NO**

May we use your child's/childrens' image on our website? **YES / NO**

May we record your child's/childrens' image on video or web cam? **YES / NO**

Are you happy for your child/ren to appear in the media - e.g. if a newspaper, photographer or television film crew attend an event? **YES / NO**

**Please note that websites can be viewed throughout the world and not just in the United Kingdom where UK law applies. Please see below for conditions of use.**

#### Conditions of Use:

1. This form is valid for 5 years from the date you sign it, or for the period of time your child attends this school. The consent will automatically expire after this time and the photographic images (still and video) will be destroyed at this time.
2. We will not re-use any photographs or recordings after your child leaves this school. The school will be responsible for securely storing all the photographic images (stills and videos) at all times to prevent misuse, theft, etc.
3. We will not use the personal details or full names (which means first name and surname) of any child or adult in a photographic image on video, on our website, in our school prospectus or in any of our other printed publications.
4. We will not include personal email or postal addresses, or telephone or fax numbers on video, on our website, in our school prospectus or in other printed publications.
5. If we use photographs of individual pupils we will not use the name of that child in the accompanying text or photo caption.
6. If we name a pupil in the text, we will not use a photograph of that child to accompany the article.
7. We may include pictures of pupils and teachers that have been drawn by the pupils.
8. We may use group or class photographs or footage with very general labels, such as "a Greek lesson" or "making Christmas decorations".
9. We will only use images of pupils who are suitably dressed, to reduce the risk of such images being used inappropriately.
10. You can withdraw your consent at any time: if you wish to do so, please inform the school in writing.

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