

# Enrolment/Membership Form

## OADBY & WIGSTON HINDU COMMUNITY GUJARATI CLASSES

Email: [info@owhc.org.uk](mailto:info@owhc.org.uk)

Academic Year 202\_ /202\_

New Student [ ] (please tick)	Existing Student [ ] (please tick)	Previous Class/Teachers Name		
Students First names			Surname	
Date of Birth (dd/mm/yy)		Age:	*Male/Female	
Name of the Mainstream school			Mainstream school year:	
<p><i>Whilst the above named student stays at the school, the parents and/or legal guardians (named below) automatically qualify to become members of the OWHC. If you do not wish to become a member then please tick box below.</i></p> <p>We wish to opt out of becoming a member(s) of OWHC [ ]</p>				
*Father's /1 <sup>st</sup> Guardian's full name			*Mother's /2 <sup>nd</sup> Guardian's full name	
Tel. (Home)		Tel. (Work)	Tel. (Home)	
			Tel. (Work)	
Mobile No:		Email:	Mobile No:	
			Email:	
Full Postal Address				Postcode
Additional Emergency Contact		Name:	Tel:	Mob:
Names of other children at the Academy		1)	2)	3)
Any other comments, medical conditions or allergies etc...				
<p>I/We (*Parent/Guardian Name) _____ confirm the above information is true and correct and agree to abide by the rules as set out by OWHC. I agree to make a contribution of <b>£75 to OWHC</b> for the Autumn Term 2024 classes and thereafter in advance on a termly basis at the start of each term at the rate of £5 per child per session as requested by OWHC I/We understand that under no circumstances will the contribution be refunded if my child fails to attend .I have read the conditions below attached regarding the Policy on Photography/Video.</p> <p>Signed _____ Date _____</p>				
<b>For Official Use</b>		Student Membership	Name/Number	
Contribution Received _____ Receipt Issued _____		Parent/Guardian Membership	Name/Number	
Class/Teacher Allocated _____		Parent/Guardian Membership	Name/Number	
Checked/Issued By:		Date		
Fee (£75 per Student)		Payment by Bank Transfer	Sort Code : 30-15-97 A/C 00422502 - Full Name of Student as Ref.	

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## Data Protection Act

OWHC will record this information confidentially on a computer or in a manual system This information is being collected so that we put you or your daughter/son in the right class for her/his age group and so that we can track her/his attendance and progress. It also helps us to keep your daughter/son safe – so that we can contact you if they are ill or hurt, for example. We will not contact your daughter/son’s mainstream school without your permission in writing. We may give the Parents/Guardians information to our funders or use so that they can check our work. We do not give this information to any other organisation. If you object to this please contact the OWHC President or Secretary

## Parental Consent form

### Name of child:

We may take photographs of the children at our school. These images will be used in our schools prospectus or in other printed publications that we produce, as well as on our website & Facebook page. We may also make video or webcam recordings for school-to-school conferences, monitoring or other educational use.

We may also be visited by the media who will take photographs or film footage of a visiting dignitary or other high profile event (Cultural celebration Festivals, Award ceremony etc). Pupils will often appear in these images, which may appear in local or national newspapers and on our website, or on televised news programmes.

To comply with the Data Protection Act 1998, we need your permission before we can photograph or make any recordings of your child. Please answer questions 1 to 4 below, then sign and date the form where shown..*Please circle your answer*

- |  |                 |
|--|-----------------|
| 1. May we the school use your child’s photograph in the school prospectus and other printed publications that we produce for promotional purposes? | <b>Yes / No</b> |
| 2. May we use your child’s image on our website & Facebook page?   | <b>Yes / No</b> |
| 3. May we record your child’s image on video or webcam?  | <b>Yes / No</b> |
| 4. Are you happy for your child to appear in the media   | <b>Yes / No</b> |

*Please note that websites can be viewed throughout the world and not just in the United Kingdom where UK law applies.*

**Parent’s or guardian’s signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Name (in block Capitals):** \_\_\_\_\_