



## Gletwyn Preparatory School

📍 Number 832 Gletwyn Township, Harare | 📞 0786899348 / 0788562391 | ✉️  
[Info@gletwynprepschool.com](mailto:Info@gletwynprepschool.com)    [Admin@gletwynschool.com](mailto:Admin@gletwynschool.com)

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### STUDENT REGISTRATION FORM

#### 1. Student Information

- Full Name: \_\_\_\_\_
  - Date of Birth: \_\_\_\_ / \_\_\_\_ / \_\_\_\_
  - Gender:  Male  Female
  - Nationality: \_\_\_\_\_
  - Religion (optional): \_\_\_\_\_
  - Language(s) Spoken at Home: \_\_\_\_\_
  - Previous School/Nursery (if any): \_\_\_\_\_
  - Grade Applying For: \_\_\_\_\_
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#### 2. Parent/Guardian Information

##### Parent/Guardian 1 (Primary Contact)

- Full Name: \_\_\_\_\_
- Relationship to Student: \_\_\_\_\_
- Occupation/Employer: \_\_\_\_\_
- Phone Number: \_\_\_\_\_
- Email Address: \_\_\_\_\_

- Residential Address: \_\_\_\_\_

### **Parent/Guardian 2**

- Full Name: \_\_\_\_\_
  - Relationship to Student: \_\_\_\_\_
  - Occupation/Employer: \_\_\_\_\_
  - Phone Number: \_\_\_\_\_
  - Email Address: \_\_\_\_\_
  - Residential Address: \_\_\_\_\_
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### **3. Emergency Contact (Other than Parents/Guardians)**

- Full Name: \_\_\_\_\_
  - Relationship to Student: \_\_\_\_\_
  - Contact Number: \_\_\_\_\_
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### **4. Medical Information**

- Family Doctor's Name: \_\_\_\_\_
  - Doctor's Contact: \_\_\_\_\_
  - Known Allergies: \_\_\_\_\_
  - Medical Conditions: \_\_\_\_\_
  - Special Learning Needs (if any): \_\_\_\_\_
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### **5. Additional Information**

- How did you hear about Gletwyn Preparatory School?  
 Referral  Advertisement  Social Media  Other: \_\_\_\_\_
  - Person Responsible for Paying School Fees:  
\_\_\_\_\_
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## 6. Consent & Declaration

I/We, the undersigned parent(s)/guardian(s), hereby apply for the admission of my/our child to Gletwyn Preparatory School. I/We declare that the information given above is true and accurate.

Signature of Parent/Guardian 1: \_\_\_\_\_ Date: \_\_\_\_\_

Signature of Parent/Guardian 2: \_\_\_\_\_ Date: \_\_\_\_\_

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### For Official Use Only

- Application Date: \_\_\_\_\_
- Registration Fee Paid:  Yes  No | Receipt No: \_\_\_\_\_
- Admitted to Grade: \_\_\_\_\_
- Admission Number: \_\_\_\_\_
- Administrator's Signature: \_\_\_\_\_