



SCHOOL ADMISISON AGREEMENT

Name of Authority:

Social Worker:

Name of young person:

DOB:

Academic Year:

Please admit the above young person as a student Meadows School subject to the terms of this Agreement.

1) CONTINGENT ADMISSION

- i) I/We understand that Admission/re-Admission is at the discretion of Meadows School admission
- ii) I/We understand and agree that admission of the student is contingent on the student's agreed admission criteria.

2) PAYMENT OF FEES

The Fees as at 2025/2026 are:

Band 1 – Standard fees based on staffing ratio of 1 teacher to 4/7 pupils in lesson

£1199 per week across 52 weeks

Band 2 – Additional 1:1 behaviour support required throughout the day (Inside and outside of the lesson).

£1200 + £600 (support) = £1800 per week across 52 weeks.

i) I/We have read the current School Fee Policy and agree to abide by it fully.

ii) I/We agree that I/We are obligated for payment of tuition and fees for the entire duration of admission in school regardless of whether my/our child/ward is withdrawn or dismissed from the school before the end of a school year.

iii) I/We agree that my/our child/ward will not be allowed to attend classes if my/our account falls into arrears. Meadows School reserves the right to send accounts in arrears to a collection agency.



iv) All accounts must be satisfied in full before official or unofficial credits or academic records can be transferred to other schools and colleges or final report cards issued. All withdrawals should be communicated in writing to the School Headmaster at least one term in advance, failing which one term entire fee will be charged in lieu of notice:

3) GENERAL CONDITIONS

i) This Admission Agreement is subject to the general statements, policies, rules, regulations, conditions, traditions, financial terms, and other information as indicated in The Meadows School Parent/Student Handbook (available at <http://meadows-school.co.uk>) and the Fee Schedule as amended from time to time which are acknowledged to be incorporated into this Admission Agreement, and with which I/We have taken the opportunity to become familiar.

ii) I/We understand that these general statements, policies, rules, regulations, conditions, traditions, fee schedule and financial terms may be adopted or amended from time to time.

iii) I/We understand that the school has the right to terminate admission of any student if

(a) the student's conduct at school or away from there is unsatisfactory or is detrimental to good order and discipline in the school, (b) the student and/or the student's parents/guardians fail to abide by the school's policies, rules, and regulations or otherwise interfere with the school's accomplishment of its educational purpose or (c) the student and/or the student's parent's/guardian's behaviour is disruptive or injurious to the school or its reputation.

iv) No refund of tuition and/or any fees will be made in the case of termination of Admission.

4) PUBLICITY RELEASE

i) INTERNAL RELEASE: - I/We give/do not give (please delete as applicable) permission to use photographic and video images of my/our child/ward to be used internally, for classroom and school communications, including the student yearbook, school newsletters (print and online versions), classroom art projects, classroom photo albums/scrap books, video presentations intended for parents/students at school events, internal school website, and other school publications.

ii) EXTERNAL RELEASE :– I/We give/do not give permission to use photographic and video images of my/our child/ward for external communications, intended for prospective students and families, including press releases about sports, academic, and other achievements, brochures, external school website, advertisements, hoardings and informational videos about the school.



5) MEDICAL

- i) I/We understand it is the policy of the school that, in order to reduce risk of spreading any illness, a student with a contagious and/or communicable disease may not be allowed on site, in such cases pupils will be able to access our remote learning platform which will be bespoke to the pupils ability level.
- ii) The Headmaster has the authority to make the decision based on the advice of any appropriate physician from whom he or she may seek counsel. I/We understand that if in the opinion of a properly licensed and practicing physician, my/our child/ward needs medical or surgical services which require my/our authorization or consent before being supplied, I/We hereby authorize, appoint and empower Meadows School, to act as my/our agent to furnish on my/our behalf such oral or written authorization as may be required, and I/We release Meadows School, from any liability which might arise from the giving by it of such authorization; it being my/our desire that my/our child/ward be furnished with such medical or surgical services as soon as reasonably possible after the need arises.
- iii) I/We understand that Meadows School require all students to have on file before the first day of classes immunization and health records as prescribed in the "Health Form". We undertake to file the same regularly on time.

6) PARTICIPATION IN SCHOOL RELATED FIELD TRIPS, COMPETITIONS ETC.

- i) I/We hereby authorize my/our child/ward to participate in all school related field trips, and/or classroom/advisory parties, competitions, outdoor activities etc. (herein after called "event(s)") which may include water activities. Event(s) are made known to (parents/guardians) through the website and/or class specific communication. (Parents/guardians) who object to any particular non-mandatory event(s) must give written notification to their (child/ward's) teacher/advisor of their (child/ward's) non-participation in that event(s).
- ii) I/We assume all risks and hazards incidental to these event(s) and accept general liability for the participation of my/our child/ward in these event(s). I/We do further release, absolve, indemnify, and hold harmless Meadows School, their officers, employees, directors, volunteers, families hosting the event(s), the organizers, their agents, representatives, or assigns.
- iii) I/We hereby waive all claims, liabilities, and/or suits against Meadows School, officers, employees, directors, volunteers, families hosting the event(s), the organizers, their agents, representatives, or assigns, for any injury to my/our child/ ward, any loss due to theft of or damage to my personal property or for any other consequential or incidental damages caused in any manner whatsoever, including my/our child's/ward's misbehaviour or disregard of regulations while participating in any event(s) and where any liability is attributable to the absence of ordinary or even slight care by the event(s) organizers and the conduct of this event(s).



iv) I/We further state there is no medical condition, including allergies, of any kind that my/our child/ward has that would prevent him/her from participating in these event/s.

7) TRANSPORT

i) If my/our ward subscribes to daily transport run by Meadows School I/we undertake that my/our child/ward shall abide to and follow all the Rules, Regulations, Do's and Don'ts as prescribed and may be prescribed by the school.

ii) I/we further authorize the school to organize transport, whether own or contracted for my/our child/ ward to participate in any field trip, competition or any other outdoor activity. I/We understand that all reasonable safety precautions are followed by the school. I/We do release, absolve, indemnify, and hold harmless Meadows School, their officers, employees, directors their agents, representatives, or assigns.

iii) I/We hereby waive all claims, liabilities, and/or suits against Meadows School, officers, employees, directors, their agents, representatives, or assigns, for any injury to my/our child/ward or any loss due to the use of such transport.

8) LIABILITY

i) I/We understand that the school is not responsible for damages to or loss of personal belongings.

ii) I/We understand that it is mandatory for every student at Meadows School to be suitably covered with Medical Insurance and Personal Accidental Insurance that the school may subscribe from time to time.

AUTHORITY'S AUTHORISATION

EMPLOYEE'S NAME _____

SIGNATURE _____

EMPLOYMENT ROLE _____

DATE _____

Agreed Fee BAND _____