



ENROLMENT APPLICATION

Please forward to
card, please call Accounts Department on (02) 4861 1366.

of \$220 . pay via credit
form does not constitute acceptance of the student.

Student's Surname:		Gender:	
Student's Firstname:		DOB:	__ / __ / ____
Student's Middle Name:		Proposed Date of Entry:	Term: Year:
Preferred Name:		Academic Year of Entry:	
Name of Current School/Preschool:		Current Year (e.g. Yr 6):	

Is the student of Aboriginal or Torres Strait Island Origin? Yes No

_____ : Mother Father Guardian

Title:

Full Name:

Occupation: