STUDENT DETAILS:				
Name and Surname		D.O.B	Year Level	
1				
2				
3				
4				
FAMILY DETAILS:				
	Parent / Caregiver 1	Parent /	Caregiver 2	
Family Name				
Given names				
Relationship to Student				
Occupation				
Work Location				
Work Phone				
Home Phone				
Mobile				
Email Address				
ADDRESS DETAILS:				
Address Line 1				
Town				
Postcode				

EMERGENCY CONTACT DETAILS:

	Emergency Contact 1	Emergency Contact 2		
Name				
Relationship				
Home Phone				
Work Phone				
Home Mobile				
	Emergency Contact 3	Emergency Contact 4		
Name				
Relationship				
Home Phone				
Work Phone				
Home Mobile				
PERMISSION TO BE CANCELLED Please tick				
Internet Access Agree	ement			
Media				
Religious Instruction				

SIGNATURE:

DATE: _____