Application for Enrolment

Student name: ______________________________________   Academic Year: ________   Entry Year ________

Please complete this form and return to:
The Registrar
All Saints’ College
Locked Bag 9
Bathurst NSW 2795
AUSTRALIA
02 6331 3911
admin@saints.nsw.edu.au
Application Form

FAMILY DETAILS

Mother________________________________________
Home Address__________________________________
______________________________________________
Postcode _________  Country _____________________
Postal Address (if different from above)______________
______________________________________________
______________________________________________
Telephone Numbers
Home (     )____________________________________
Work (     )____________________________________
Mobile________________________________________
Email_________________________________________
Profession/Occupation____________________________

Student's Name __________________________________________________    Male□ Female□
Preferred Name __________________________________________________
Student's Address ___________________________________________________________________
Date of Birth     ____ /  ____ / ____                   Passport Number (Overseas Students only) _________________________
Requested Date of Entry Term _____ 20_____ into Year/Level ______ as a ☐ Full time Boarder  ☐ Day Student
☐ Weekly Boarder
Pre-Kindergarten only: Number of Days per week ________ Requires a place in Kindergarten in the following year? ☐ Yes ☐ No
Present or last school/daycare centre attended ________________________________________________________________
Country of Citizenship __________________________________________________________________________________
Siblings       Age   Current School
______________________________________________
______________________________________________
______________________________________________
Does this student have any known special needs or disabilities? ☐ Yes ☐ No (If Yes please elaborate and attach additional
documents) __________________________________________________________________________________________
____________________________________________________________________________________________________
Does this student have any special dietary requirements? ☐ Yes ☐ No (If Yes please attach additional documents)
____________________________________________________________________________________________________

FAMILY DETAILS

Father________________________________________
Home Address_________________________________
______________________________________________
Postcode _________  Country __________________
Postal Address (if different from above)___________
______________________________________________
Telephone Numbers
Home (     )___________________________________
Work (     )____________________________________
Mobile________________________________________
Email_________________________________________
Profession/Occupation___________________________

(Family Name)
Enrolment Terms and Conditions

- Students are bound by and must adhere to the College rules and regulations as contained in the College Student Handbook. Non-compliance with these rules and regulations may result in the student being asked to leave the College.

- Students are expected to participate in the College program of core and co-curricular activities.

- Fees and charges are to be paid on the due date advised on the statement of account.

- For Australian students, a full Term’s notice in writing must be given to the Head of College before a student is withdrawn from the College or, in default, one term’s fees (tuition and boarding if applicable) shall be payable. A change from boarding to day status requires a full Term’s notice or boarding fees will be charged in lieu.

- For Overseas students, two terms notice in writing must be given to the Head of College before a student is withdrawn from the College or, in default, two term’s fees (tuition and boarding) shall be payable.

- When an offer of place is made by the College, the non-refundable Enrolment Fee is required to confirm the parents’ acceptance and, in the case of overseas students, the deposit and requested advance payment of tuition and boarding.

- The deposit or credit balance of the account will be refunded 2 months after the student leaves the College.

I/we agree to be bound by the College regulations and conditions.

Signature of Parent/s (both to sign) or Guardian/s

Father/Guardian_________________________________   Mother/Guardian_________________________________

Date________________________________________   Date________________________________________

Account Details

Name and address of the person/s responsible for the payment the account.

Name ______________________________________________________________________________________________

Address ________________________________________________________________________________________________ Postcode _____________

Telephone Numbers

Home (  )_________________________________   Work (  )_________________________________

Fax (  )_________________________________   Mobile________________________________

I/We agree to the requirements covering payment of fees, and to be liable for them. I/We have received and read the current fee schedule.

Signed ___________________________________________________   Date __________________________

Signed ___________________________________________________   Date __________________________
EMERGENCY CONTACT *(This section must be completed)*

**Australian Students**: The name and address of a relative, friend or neighbour who may be contacted in parents/guardians’ absence.

**Overseas Students**: The contact details of a relative over 21 years of age who lives in NSW and is willing to act as Guardian for the student.

Name ____________________________________________________________

(Given Name/s)..............................................................................

(Family Name)..............................................................................

Address __________________________________________________________

(Overseas student only)

Telephone Numbers  Home ( )____________  Work ( )_____________  Mobile___________________

Directions for Correspondence

As family structures can differ widely, the following information is requested to avoid errors in correspondence, mailing of accounts etc. Please tick the appropriate boxes as applicable.

Send Fee Accounts to:

☐ Family Address  ☐ Mother  ☐ Father  ☐ Other

(Please specify)

Send School Reports & Other Correspondence to:

☐ Family Address  ☐ Mother  ☐ Father  ☐ Other

(Please specify)

Email correspondence to:

☐ Mother  ☐ Father  ☐ Other

(Please specify)

If you have a specific requirement as to how you would like your child’s name to appear on their report, please write it here: ______________________________________________________

How did you first hear about All Saints’ College?

☐ Yellow Pages  ☐ Word of Mouth  ☐ Other (please specify)________________________

☐ Internet (please specify):____________  ☐ Advertising (please specify)_____________________

Old Bathurstian Information

Were any relatives of this applicant ex-students of either All Saints’ College or Marsden School? If so, please give details.

Name ___________________________________________  Name ________________________________

Relationship to Applicant __________________________  Relationship to Applicant ______________

Attended ASC / Marsden from _____ to_______ (years)  Attended ASC / Marsden from _____ to_______ (years)

(Please circle)  (Please circle)

Does your family have an affiliation with an ASC Senior School House?  ☐ Bean  ☐ Barton  ☐ Long

OFFICE USE ONLY

<table>
<thead>
<tr>
<th>Student No</th>
<th>Start</th>
<th>Receipt</th>
</tr>
</thead>
<tbody>
<tr>
<td>Family No</td>
<td>Signatory</td>
<td>Enrolment Fee</td>
</tr>
<tr>
<td>House</td>
<td>Scholarship/Bursary</td>
<td>Deposit</td>
</tr>
</tbody>
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(Reviewed March 2013)