

# SIDRAH GARDENS SCHOOL

Office Use Only
RECEIPT NO.
DATE RECEIPT
FAMKEY
SORTCODE

**Student Details** 

Father / Male Guardian

Mother / Female Guardian

## **Registration Form**

Student Details				
Family Name				
Given Name				
To enter year level	in the year Gender Male Female			
Date of birth	Country of birth			
Religion	Nationality			
Present school / Kind Including Overseas Countries Student lives with	er E Both parents or Father only or Mother only Grandparents Other please specify Please attach any documentation of cour orders/or parenting plans)			
Australian Citizen	Yes or No Permanent Resident of Australia Yes or No			
Father/Male Guard	lian Details			
Full Name				
Residential Address	Post Code			
Postal Address				
Occupation	Country of Birth			
Home Phone	Mobile Mobile			
Work Phone	Email			
Signature of Parent /	Guardian Date Date			
Mother/Female G	uardian Details			
Residential Address				

 Address
 Post Address

 Occupation
 Country of Birth

 Home Phone
 Mobile

 Work Phone
 Email

 Signature of Parent / Guardian
 Date

# Completed form and attached Birth Certificate must be returned to the School Registrar

Office Use Only			
DOB EVIDENCE			
EDUCATIONAL REPORT			
MEDICAL REPORTS			

**Registration Form** 

Current School Contact	As part of the enrolment process the students current school will be contacted	
School Name	Contact	Currents
Position	Phone	ents
Postal Address		
Emergency Contact		Em
Contact Name	Mobile Mobile	Emergency
Relationship to Student		Y

#### Siblings at Sidrah Gardens School

Please, fill in if appllicable. Even if currently awaiting admission. Names of other children at this school	Year Level
L [	

### **Payment Details**

A one-off Registration Fee of \$110 is payable with the Registration form. This fee is non-refundable.

Methods of payment: Bank Transfer Sidrah Gardens School Ltd BSB: 033-395 Account: 599484

#### Declaration

We declare that all the information provided in this Registration form is true and correct as of the date of registration. We request that the above child be registered for enrolment at the Sidrah Gardens School. We understand that we will be informed if and when a place becomes available. We are aware that the Registration fee is non -refundable. We will also advise the Sidrah Gardens School of any change of address or contact details we may have.

Signature of Parent / Guardian (Male)	Date
Signature of Parent / Guardian (Female)	Date

SIDRAH GARDENS SCHOOL 434-442 Belgrave-Hallam Rd, Narre Warren North, Victoria 3804 Australia Phone + (614) 9167 8456 Email info@sidrahgardens.com.au Website www.sidrahgardens.com.au

Siblings at SGS