



FRIMLEY PRIMARY SCHOOL ENROLMENT FORM (HOMEZONE APPLICANTS ONLY)

Pupil's Surname: _____	Pupil's First Names: _____
Address: _____ _____ _____ Post Code _____	Home Telephone: _____ Cell Phone: _____ Home Language: _____
Pupil lives with: _____ <small>(e.g. Parents, Mother, Father, Guardian etc)</small>	Previous School / Kindy: _____
Sex: Male / Female Date of Birth: ___ / ___ / ___	Birth Certificate Sighted: Yes <input type="checkbox"/> No <input type="checkbox"/>
Father/Guardian: Surname: _____ First Name: _____ Address: _____ Work phone: _____ Occupation: _____ Workplace: _____ Relationship to Pupil: _____ <small>(e.g. Father, Guardian, Stepfather etc)</small>	Mother/Guardian: Title: Mrs Miss Ms Surname: _____ First Name: _____ Address: _____ Work phone: _____ Occupation: _____ Workplace: _____ Relationship to Pupil: _____ <small>(e.g. Father, Guardian, Stepfather etc)</small>
Ethnic Group: European <input type="checkbox"/> Maori <input type="checkbox"/> Tribal Affiliation: _____ Pacific Islander (please specify) _____ <input type="checkbox"/> Asian (please specify) _____ <input type="checkbox"/> Other (please specify) _____ <input type="checkbox"/>	Immigration Status: Born in N.Z. Yes <input type="checkbox"/> No <input type="checkbox"/> Date of entry into NZ: _____ If no please attach current evidence of Immigration Status. Student Visa or Residence Visa. Visitor permits are only eligible for 21 days and are not acceptable.
Emergency Contact: Phone No: _____ Name: _____ Relationship to pupil: _____ Address: _____	Health Information: Medical/Medication (e.g. allergies, asthma, hearing, vision etc) _____ Family Doctor: _____ Previous Dental Clinic: _____ Immunisation Details are required for all new entrants.
Place in Family: / Eldest at Frimley Yes <input type="checkbox"/> No <input type="checkbox"/>	Pre-School Children: (names and DOB) _____

PRIVACY ACT 1 JULY 1993

I agree to Frimley School collecting personal information on the enrolled child for the purpose of that child's health, educational achievement, progress and the functioning of Frimley School. Work, achievements, names and photos may be displayed in a range of forms throughout the school including the Internet. Uniform – As from January 2004 I agree that this pupil will abide by the conditions outlined in the Frimley School Uniform Policy.

****This child has not been suspended from a school during the previous 12 months. (If so please write the reason on the back)**

*** I confirm that the address which I have provided to the school will be the usual place of residence of the child named above when the school is open for instruction. I will advise the school promptly of any subsequent change of address/phone number etc.**

Signed _____ (Parent/Legal Guardian/Caregiver) Date _____

OFFICE ONLY

ADMISSION DATE _____ ADMISSION NO _____ ROOM NO _____ YEAR LEVEL _____
 ENTERED ON SYSTEM _____ RECORDS REQUESTED _____ HOUSE _____