**ENROLMENT ENQUIRY**

|  |  |
| --- | --- |
| Names of parents/guardians: |  |
| Address: |  |
| Contact phone numbers: | (H) (W)(M) |
| Email address: |  |
| Name/s and year level/s of children: | 1. Year:2. Year:3. Year:4. Year: |
| Last school attended: |  |
| Medical history: |  |
| Other information: |  |
|  |  |
| Office use only: |