

Enrolment Form for ____ weeks of Term ____, Year ____

PICCOLINI for 3-4 yrs

CHILD / STUDENT DETAILS

Family name	Given Name/s
Date of Birth (Day) / (Month) / (Year)	
Country of Birth	Date of Arrival in Australia
Main Language spoken by the child at home	Religion
Aboriginal or Torres Strait Islander (circle one) YES / NO	

FAMILY DETAILS

	Parent 1 / Guardian 1	Parent 2 / Guardian 2
Title	Mr Mrs Ms Miss Dr (Please circle)	Mr Mrs Ms Miss Dr (Please circle)
Family Name		
Given Name		
Relationship to child		
Occupation		
Employer		
Contact nos. Home		
Work		
Mobile		
Email		
Country of Birth		
Date of arrival in Australia (if applicable)		
Cultural background		
Main language spoken at home (if not English)		
Religion		
Residential Address	Postcode	Postcode
Family / Custody / Court order YES / NO (If yes, please provide the school with a copy)		

FAMILY – PRESCHOOL RELATIONSHIPS

The Early Years Education Programs including Playgroup, Piccolini and Preschool operate under the auspices of, and is accountable to, the School Board. The School Principal is responsible for the overall administration of the Preschool. Because of the important place of family/school relationships in your child's development the Preschool undertakes to –

- * Support the continuing faith development of your child
- * Provide the conditions for regular and close liaison between the child's family and Preschool staff.
- * Build on the child's family experiences by offering a variety of play and social experiences.
- * Offer parents/caregivers opportunities to meet, socialise and support each other.
- * Provide information to parents/caregivers about community support services.
- * Provide opportunities for parent/caregivers to increase their knowledge about how children develop and learn.

AUTHORITY TO COLLECT CHILD ONLY: Collect child only but not to be contacted in an emergency

Name: _____ Contact number: _____

Address: _____ Relationship to the child: _____

TERMS AND CONDITIONS

By enrolling my child in one of The Early Years Education Programs (Playgroup, Piccolini, Preschool),

1. I/we accept that my child will be safe and welcoming environment.
2. I/we accept that support of staff and co-operation concerning school activities is essential.
3. I/we accept that we will abide by school policies and procedures.
4. I/we accept the importance of building family & school partnerships
5. I/we support the programs, activities and events organised at St Joseph's Payneham.

I acknowledge and accept all of the above terms and conditions:

Mother/Guardian (signature): _____ **Date:** _____

Father/Guardian (signature): _____ **Date:** _____

I declare that all of the information provided in this application is, to the best of my knowledge, true.

Both parents/guardians

Signature: _____ Signature: _____

Date: _____ Date: _____

