



Ridgehaven Primary School

479 Milne Road, Ridgehaven | Ph +61 8 8264 5277 | Email dl.1051.info@schools.sa.edu.au

ENROLMENT REGISTRATION OF INTEREST

Student Personal Details

Family Name:

Given Names:

Preferred Name:

Date of Birth: Gender: Male Female

What is the student's previous school or Kindergarten?
If overseas, nominate country. If interstate, nominate state.

What date are you seeking admission for?

What Year Level are you seeking admission for?

Biological Parent 1 or Legal Guardian 1

Mr/Mrs/Ms/Other:

Family Name:

Given Names:

Gender: Male Female

Relationship to student:

P/G1 Mobile Phone:

P/G1 Email:

Biological Parent 2 or Legal Guardian 2 (optional)

Mr/Mrs/Ms/Other:

Family Name:

Given Names:

Gender: Male Female

Relationship to student:

P/G2 Mobile Phone:

P/G2 Email:

Current Student Address Details

Residential Address (This should be the primary residential address where the child lives most of the time)

Address Line 1:

Address Line 2:

Suburb/Town:

Postcode: Country:

Brothers and Sisters

Full Name

Gender

Male	<input type="checkbox"/>	Female	<input type="checkbox"/>
Male	<input type="checkbox"/>	Female	<input type="checkbox"/>
Male	<input type="checkbox"/>	Female	<input type="checkbox"/>
Male	<input type="checkbox"/>	Female	<input type="checkbox"/>

Date of Birth

Attends this School?

<input type="checkbox"/>	No	<input type="checkbox"/>	Yes
<input type="checkbox"/>	No	<input type="checkbox"/>	Yes
<input type="checkbox"/>	No	<input type="checkbox"/>	Yes
<input type="checkbox"/>	No	<input type="checkbox"/>	Yes

If your child has any special learning or medical needs, please provide details below

Documentation supporting application

This application will only be considered once the both documents have been submitted

- Copy of Child's Birth Certificate is attached with this application
- Proof of residence (eg Utility bill, council rates, rental agreement)

Parent/Guardian Signatures

by signing this form you certify that all information given is true and accurate

Signature of Biological Parent 1 / Legal Guardian 1:

Date:

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Signature of Biological Parent 2 / Legal Guardian 2:

Date:

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Date Received by school: