

Information about parents / caregivers

Child Lives With	
Custody and Access Information	

Mother

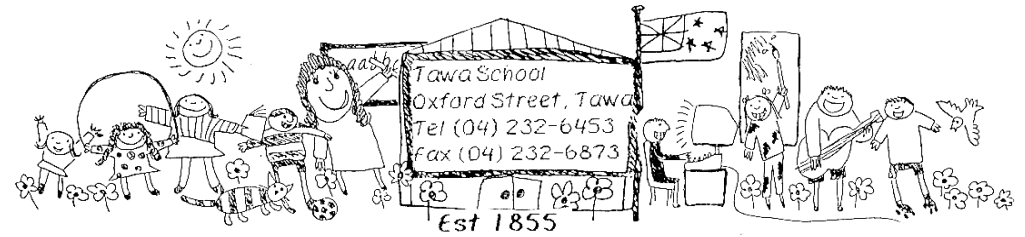
Family Name	
Given Name	
Ethnicity	
Occupation	
Employment Address	
Phone Number	

Father

Family Name	
Given Name	
Ethnicity	
Occupation	
Employment Address	
Phone Number	

Names and birthdates of other members of the family likely to be attending Tawa School in the future:

Other family information that we may need



Tawa Primary School

Te Kura O Tawa

Enrolment Form

Child's name

Office to complete:

Enrolment Date	<input type="text"/>	Teacher	<input type="text"/>
Admission No.	<input type="text"/>	Year Level	<input type="text"/>
DOB Verification	<input type="text"/>	Room	<input type="text"/>
Immunisation Record	<input type="text"/>		

Parent / Caregiver to complete

I have completed all relevant parts of this enrolment form.
I have read the school rules and agree to support my child with these.

I have attached a record of my child's immunisations.
I have attached a copy of my child's NZ birth certificate or NZ citizenship or Immigration Service document or Passport showing residency or student visa.

I will inform the school of any changes to the information I have given on this form.

Signed _____

Date _____

