



Marist Catholic School

PREFERENCE

PRE-ENROLMENT FORM



In making the choice to enrol your child at a Catholic School, there is an expectation that you will support your child's faith development. This includes regular attendance at Mass, especially Marist Parish Family Masses. It is also expected your child will be baptised before starting school and that during their time at school they will receive the Sacraments of Initiation (Reconciliation and Holy Communion).

PUPIL DETAILS: (PLEASE COMPLETE THIS FORM USING BLOCK CAPITALS)

FULL NAME: _____ BOY / GIRL
Family name First names

DATE OF BIRTH: _____

ETHNICITY: _____ IWI: _____

MOTHER'S RELIGION: _____ FATHER'S RELIGION: _____

CHILD BAPTISED: YES / NO
 (to support this pre-enrolment please ensure you have a copy of the Baptismal certificate to present to the Parish Priest)

IF NO, PLEASE STATE WHEN YOUR CHILD WILL BE BAPTISED: _____

EARLY CHILDHOOD EDUCATION: _____ YEARS: _____ HOURS: _____

PARENT/CAREGIVER DETAILS

TITLE: _____ FAMILY NAME: _____
(MR / MRS / MS)

FIRST NAMES: _____ RELATIONSHIP TO CHILD: _____

CONTACT ADDRESS: _____

POST CODE: _____ EMAIL ADDRESS: _____

HOME PHONE: _____ WORK PHONE: _____ MOBILE: _____

OCCUPATION: _____



TITLE: _____ FAMILY NAME: _____
(MR / MRS / MS)

FIRST NAMES: _____ RELATIONSHIP TO CHILD: _____

CONTACT ADDRESS: _____

POST CODE: _____ EMAIL ADDRESS: _____

HOME PHONE: _____ WORK PHONE: _____ MOBILE: _____

OCCUPATION: _____

PARISH YOUR FAMILY IS ASSOCIATED WITH: _____

NAME OF PARISH PRIEST: _____

OTHER DETAILS

SPECIAL NEEDS: (BACKGROUND/FUNDING) _____
(if applicable)

OTHER SIBLINGS: _____ DATE OF BIRTH: _____
_____ DATE OF BIRTH: _____
_____ DATE OF BIRTH: _____

PRIVACY ACT 2020

Our school undertakes to collect, use and store information you provide on this form according to the principles of the Privacy Act 2020. The information may be provided to the Proprietor or Proprietor's agent, the Minister of Education and the Education Review Office, and for administration purposes within the school. We agree that this information can be used for the above purpose.

PARTICIPATION IN SCHOOL PROGRAMME

I/We the undersigned, undertake as a condition of enrolment that the above named student will participate in the general School programme that gives your school its Catholic Special Character.

Signed _____ Signed _____
(Mother/Guardian) (Father/ Guardian)

Please return this completed form with a copy of the Preference Certificate, Baptism Certificate, Birth Certificate or Passport and a copy of your child's Immunisation Certificate.

OFFICE USE ONLY:

DATE RECEIVED: _____

- PREFERENCE FORM
- BAPTISM CERTIFICATE
- ATTENDANCE DUES AGREEMENT
- BIRTH CERTIFICATE
- IMMUNISATION CERTIFICATE

PRINCIPAL: _____

LETTER OF ACCEPTANCE: _____