

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		
Fami	y name	First names			
DATE OF BIRTH:		_ IWI:			
ETHNICITY:	LANGUAGES SPOKEN AT HOME:				
MOTHER'S RELIGION:	F	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)					
EARLY CHILDHOOD EDUCATION	ON:	YEARS:	HOURS:		
PARENT/CAREGIVER DETAIL:	s				
TITLE:(MR / MRS / MS)	FAMILY NAME:				
FIRST NAMES:		RELATIONSHIP TO CH	ILD:		
CONTACT ADDRESS:					
POST CODE:					
HOME PHONE:	WORK PHONE:	MOBIL	E:		
COUNTRY OF BIRTH:					
TITLE:(MR/MRS/MS)	FAMILY NAME:				
FIRST NAMES:		RELATIONSHIP TO CH	ILD:		
CONTACT ADDRESS:					
POST CODE:					
HOME PHONE:	WORK PHONE:	MOBIL	E:		
COUNTRY OF BIRTH:					

PARISH YOUR FAMILY IS ASSOCIATED WITH:					
NAME OF PARISH	PRIEST:				
071177 77711 0					
OTHER DETAILS					
SPECIAL NEEDS: ((if applicable)	BACKGROUND/FUNDING)				
OTHER SIBLINGS:			DATE OF BIRTH:		
			DATE OF BIRTH:		
			DATE OF BIRTH:		
	PRIVAC	Y ACT 2	2020		
principles of the Priv the Minister of Educ	acy Act 2020. The information n	nay be pi Office, a	you provide on this form according to the provided to the Proprietor or Proprietor's agent, and for administration purposes within the above purpose.		
	PARTICIPATION IN	SCHOO	OL PROGRAMME		
•	ed, undertake as a condition of electory or a condition or a conditio		nt that the above named student will participate in atholic Special Character.		
Signed		_ Signed	ed		
	(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 AGREE	EMENT			
	BIRTH CERTIFICATE				
	IMMUNISATION CERTIFICATI	E			
PRINCIPAL:	LETTER OF ACCEPTANCE:				