

# ENROLMENT APPLICATION



**BALCOMBE**  
GRAMMAR SCHOOL

To: The Registrar, Balcombe Grammar School, PO Box 607, Mount Martha Victoria 3934

**STUDENT SURNAME** .....

**FIRST NAME** .....

**MIDDLE NAME/S** .....

Preferred Name (if different from above) .....

Sex M  F

Previous school/kindergarten .....

Religious affiliation .....

Date of birth .....

Proposed date/year of entry ..... Year level of entry .....

VSN (if applicable) .....

OFFICE USE ONLY	
Date Enrolment Received	
Contact ID	
Student ID	
G/L	
Receipt	
Receipt Amount	
Receipt Date	
Posting	

**Please Note: an additional enrolment application form should be completed for each child**

<p><b>PARENT / GUARDIAN 1</b> Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Miss <input type="checkbox"/> Ms <input type="checkbox"/> Dr <input type="checkbox"/></p> <p>Surname .....</p> <p>Given Name .....</p> <p>Relationship to student .....</p> <p>Living with student? Yes <input type="checkbox"/> No <input type="checkbox"/></p> <p>Residential Address .....</p> <p>Suburb ..... Postcode .....</p> <p>Home Phone .....</p> <p>Mobile .....</p> <p>Email .....</p> <p>Occupation .....</p> <p>Business hours phone .....</p>	<p><b>PARENT / GUARDIAN 2</b> Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Miss <input type="checkbox"/> Ms <input type="checkbox"/> Dr <input type="checkbox"/></p> <p>Surname .....</p> <p>Given Name .....</p> <p>Relationship to student .....</p> <p>Living with student? Yes <input type="checkbox"/> No <input type="checkbox"/></p> <p>Residential Address .....</p> <p>Suburb ..... Postcode .....</p> <p>Home Phone .....</p> <p>Mobile .....</p> <p>Email .....</p> <p>Occupation .....</p> <p>Business hours phone .....</p>
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Full information on any known learning/behavioural/physical disabilities and relevant assessments/reports must be provided. Failure to disclose this information may result in any offer of a place being withdrawn. Has your child any physical, medical, learning or behavioural problems of which the school should be aware? (If space is insufficient, please supply separately)

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# ENROLMENT APPLICATION



## SCHOOL RULES

1. Students will respect teachers, parents, visitors and their fellow students
2. Students will be on time for school, assemblies and classes
3. Students will wear and maintain in good order their school uniform
4. Students will care for the school property, buildings and gardens
5. Students will stay in the playground area set aside for them

Constant breaches in school rules or serious misconduct will be dealt with by the Principal in consultation with the student and parents.

Should the child be accepted for enrolment at Balcombe Grammar School, I/we agree to:

1. Support the aims of the school.
2. Abide by the school rules.
3. Pay school fees and all other charges as required by the due date.
4. Give one term's notice of intent to withdraw the child from the school or a term's fee will be payable.
5. This enrolment application form requires an administration fee of \$100.00 and is non-refundable.
6. An enrolment confirmation deposit is required within one month of the offer of a place.  
This is taken as part payment of the 1st Term fees. The confirmation deposit is non-refundable.

The voluntary building fund donation is included on the fee statement each year with the total fees payable. The voluntary building fund donation is tax deductible and is non-refundable. Whilst this is a 'voluntary' donation, it forms an essential part of the School's capital income.

It is the policy of the School to determine the position of each student in line with our published Enrolment Policy.

It is the responsibility of parents to notify the School in writing of any changes to contact details. Failure to do so will result in the child's enrolment being cancelled when mail is returned marked 'Left Address' and contact cannot be made via recorded telephone numbers.

### PARENT / GUARDIAN AGREEMENT (both parents / guardians to sign)

In signing this document, I/we agree to the terms and conditions as set out above.

Signed: ..... Name (printed): ..... Date: .....

Signed: ..... Name (printed): ..... Date: .....

### FEE PAYMENT AGREEMENT

Name and Address of person to receive accounts: .....

(A letter of authority is required from the person responsible for the accounts if other than parents / guardians)

The person/s signing this form will be held jointly and severally responsible for payment of all fees and charges.

Where only one parent / guardian has signed the form they must satisfy the School that they are the sole parent or guardian and will be responsible for all fees and charges.

In signing this document, I/we agree to the terms and conditions as set out above.

Signed: ..... Name (printed): ..... Date: .....

Signed: ..... Name (printed): ..... Date: .....

**This application places your child onto our waiting list and is not a guarantee of a position.**

A non-refundable administration fee of \$100.00 (per family) to be sent with this application.

# ENROLMENT APPLICATION FEE CREDIT CARD PAYMENT FORM



**BALCOMBE**  
GRAMMAR SCHOOL

Family Name \_\_\_\_\_

Amount

\$100.00 (per family)  
\_\_\_\_\_

Card Type

Visa  Mastercard

All information collected will be handled in accordance the School's Privacy Policy. For further information please visit [www.balcombegrammar.vic.edu.au](http://www.balcombegrammar.vic.edu.au)

Card Number

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Expiry Date

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Security Code (CVV) three digits on back of card

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Name of cardholder \_\_\_\_\_

Signed \_\_\_\_\_