

2008 School Fees

1. Administration Charge per family: \$100 per year; payable in advance and non-refundable.
2. Deposit per family: \$1000 refundable when last child of the family leaves the School.
3. Building Levies are not **TAX DEDUCTIBLE** and are not an optional payment.
4. Receipts/Statements are issued for all payments at the beginning of each month.
5. Parents shall be charged replacement cost for damaged or loss of text-books, other resources, and equipment.
6. Excursions cost shall be paid as and when required in cash.
7. One Term's written notice is required for the student leaving the School. Failure to provide one term's written notice will result in forfeiture of the Deposit and the Term's fees being charged in lieu of Notice.
8. Fees are subject to change without notice.
9. Terms & Conditions of this contract may change from time to time.
10. Payment is to be made by 10 equal sums commencing 15th December 2007 and continuing monthly.
11. School Uniforms relevant to gender and season must be worn at all times.
12. Compulsory dates to attend School are for Parents and Children (Roll attendance is marked).

- A. Australia Day
- B. St. Vartan's Day
- C. Palm Sunday
- D. Mother's Day
- E. St. Gregory's Day
- F. Father's Day
- G. School Fete
- H. School Concert
- I. Graduation Day
- J. Award Night
- K. Carol's By Candlelight
- L. Parent Teacher Meetings
- M. Both Parents twice a year are required to Supervise at these functions and not participate.
- N. Other Conditions

Name of Father	Name of Mother	Name of Witness	Date
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Signed by Father	Signed by Mother	Signed by Witness	
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Class	Tuition	Book	Levy	Cleaning
Stage 1	\$1100	0	\$396	\$165
Stage 2	\$1100	0	\$396	\$165
Stage 3	\$1100	0	\$396	\$165
Stage 4	\$1450	\$400	\$396	\$165
Stage 5	\$1550	\$450	\$396	\$165
Stage 6	\$1950	\$500	\$396	\$165

ENROLMENT APPLICATION

1. Student Information

Surname: _____ Christian Name: _____
 Preferred name in conversation: _____
 Point of Entry: _____
 Previous School: _____
 Date of Birth: ___/___/___ Religion: _____ Medicare No: _____
 Nationality: _____ Languages spoken at home: _____
 Country of Birth: _____ Residential status: Permanent YES/NO
 Residential Address: _____
 _____ Postcode: _____
 Home Phone: _____ Email: _____

2. Parent Information (Father)

Title: ___ Surname: _____ Christian Name: _____
 Occupation: _____ Job Title: _____
 Employer: _____ Religion: _____
 Residential Address: _____
 _____ Postcode: _____
 Home Phone: _____ Work: _____ Mobile: _____
 Nationality: _____ Email: _____
 I declare this information to be true, Signature: _____

3. Parent Information (Mother)

Title: ___ Surname: _____ Nee: _____ Christian Name: _____
 Occupation: _____ Job Title: _____
 Employer: _____ Religion: _____
 Residential Address: _____
 _____ Postcode: _____
 Home Phone: _____ Work: _____ Mobile: _____
 Nationality: _____ Email: _____
 I declare this information to be true, Signature: _____

4. Emergency Contact

Title: ___ Surname: _____ Christian Name: _____
 Relationship to student: _____
 Home Phone: _____ Work: _____ Mobile: _____

5. Medical Details

Doctor's Name: _____ Phone No _____
 Student Medicare No _____ Blood Group _____
 Address: _____
 _____ Postcode: _____
 Allergies: YES/NO _____ Medical Problems: YES/NO _____
 If Yes specify _____ If Yes specify _____

