IN - ZONE / OUT OF ZONE

ROOM #			START DATE				
YEAR			ENROLMENT #				
TEACHER			NSN #				
HOUSE			TRANSITION VISIT/S	;			
RECEIVED:	Birth Certificate Pa	issport Imn	nunisation Evidence	Prooi	f of Address	Student Visa	Residency

Bailey Road School Enrolment Form

Welcome to Bailey Road School. To enrol your child/ren you will need to provide the original documents for us to copy - a birth certificate or passport for your child, their Immunisation Records, proof of address (a utility bill), your identification, student or resident Visa - if this is applicable.



STUDENT DETAILS

Surname/ Family name		First/Given Names	
Address		Preferred Name	
Place in family	Of	Ethnicity	
lwi/Hapu		Language/s spoken at home	1st 2nd
Country of Birth		Passport #	
Date of Birth		Gender	
NZ Resident	YES / NO	Birth Certificate #	
Country of Birth		Date of entry to NZ	
Country of Citizenship		Student Visa or Resident Visa Info	
Start date of any school		Issue/Expiry	
Previous School		Current Year Level	

PARENT / CAREGIVER

Surname/Family name		First/Given Names	
Address (if different)		Relationship to child	
Email		Mobile #	
Country of Birth		Work #	
NZ Resident	YES / NO	Work Visa	YES / NO
Occupation		Legal guardian	YES / NO

PARENT / CAREGIVER

Surname/Family name		First/Given Names	
Address (if different)		Relationship to child	
Email		Mobile #	
Country of Birth		Work #	
NZ Resident	YES / NO	Work Visa	YES / NO
Occupation		Legal guardian	YES / NO

EMERGENCY CONTACT - OTHER THAN PARENT

Name	Mobile #	
Relationship to child	Work/Home #	

HEALTH AND MEDICAL

Medical / Special Needs			
Allergies			
Is specific medication taken by your child	YES / NO	Further info	

EARLY CHILDHOOD EDUCATION

Has your child attended Kindergarten, Kohanga Reo, Play Centre?	YES / NO	If so, how long did they attend? Eg. 20 weeks, 1 year	
Name of ECE			

PARENTAL / CAREGIVER CONSENT

BIBLE IN CLASS - I agree that my child can be part of the Bible in Class programme in the Kowhai Team when they are Year 5-6.	YES / NO
DEVICES - I agree to support Bailey Road School with my child's understanding and appropriate use of Digital Technology and Cybersafety when using school devices, their school account and their BYOD - should they have one at school.	YES / NO
PANADOL - I agree to Bailey Road School administering Panadol to my child if necessary.	YES / NO
PHOTOS - I agree to Bailey Road School being able to take/use photos of my child on the Bailey Road School website, Facebook page, school newsletter and online learning platforms.	YES / NO
LEARNING EDUCATION OUTSIDE THE CLASSROOM - I agree to my child taking part in trips and learning experiences outside the classroom. Bailey Road School will follow Health and Safety procedures and communicate details of the event prior to it taking place. I acknowledge that my child will need to behave responsibly and in accordance with our HEART values and should there be an incident, parents/ caregivers will be contacted immediately.	YES / NO