



St John the Baptist Primary School, Koo Wee Rup

Enrolment Expression of Interest For the Year 20_____

Student Information

Student name: _____ Date of Birth: / /

Year level wishing to enroll in: _____ Sex: Male / Female

Religion: _____ Baptism date: / /
(Please attach copy of Baptism Certificate)

Current school or Kindergarten: _____

Parent/Guardian Information

Name: _____ Phone: _____

Relationship to child: _____

Religion: _____

Name: _____ Phone: _____

Relationship to child: _____

Religion: _____

Correspondence to (ie Mr & Mrs...): _____

Email: _____

Mailing Address: _____

Postcode: _____

Parent/Guardian Signature: _____ Date: _____

Office use only:

Pre-enrolment letter / /

Enrolment Pack: / /