



Name of Student: _____

Date of Birth: _____

SCHOOL ENROLMENT FORM

INFORMATION PRIVACY STATEMENT

The Department for Education and Child Development (DECD) is committed to respecting the confidentiality of information provided by children/students and parents, for example, information requested on child/student enrolment forms. The information in this form is required by the *Education Regulations 2012*. It is requested to enable DECD to:

- Undertake administration and care responsibilities including maintaining emergency contact information;
- Communicate with you about important matters;
- Provide first aid and plan for child/student health support requirements;
- Provide all information required for resource entitlements;
- Collect necessary statistical information and undertake analysis of the composition and performance of the child/student population; and
- Meet reporting requirements, including to other government authorities and funding agencies.

If organisations are contracted on behalf of DECD to undertake tasks which require access to enrolment data, the contract(s) between DECD and those organisations will include strict confidentiality and disposal provisions.

It is a Commonwealth Government requirement that all schools across Australia ask the questions marked * on their school enrolment forms. Although some items on the enrolment form are not mandatory to complete under the national regulations, provision of this information will be beneficial to your child's school/preschool for planning and resourcing decisions.

The information provided in Enrolment Forms is stored securely in local school and Departmental databases. Information from your enrolment form may be transferred electronically from one site to another as your child moves locations between levels of education. Any such transferred information will be updated by information provided on the current enrolment form. While your child is enrolled in a DECD site other information will be gathered relating to your child's education and wellbeing; for example records of learning progress, absences from school, behaviour, health and social development reports, observations and assessments. The management of these data is governed by Australian, State and Departmental policies to ensure that the information is used only for the purposes stated above and is secure, private and confidential. Only unidentifiable data is reported to the Commonwealth and DECD may also provide de-identified student information for research where appropriate based on DECD operating principles and ethics guidelines. The disclosure of personal information held by Government is regulated by the Information Privacy Principles (see http://dpc.sa.gov.au/sites/default/files/pubimages/Circulars/PC012_Privacy_0.pdf). Unless required to do so by a law of the State or Commonwealth, or as permitted by the Information Privacy Principles or in accordance with the ISG (see below), the Department will not otherwise disclose the information to others without your consent.

INFORMATION SHARING STATEMENT

There will be occasions where sharing information with others outside DECD will be important to your child's educational progress, safety or wellbeing. In these circumstances DECD follows the SA Government's *Information Sharing: Guidelines for Promoting the Safety and Wellbeing of Children, Young People and Families (ISG)* www.gcyp.sa.gov.au. Under the ISG your consent for the sharing of personal information about your child will be sought and respected in all situations unless:

- It is unsafe / impossible to gain consent or consent has been refused; and
- Without information being shared, a child or children will be at increased risk of serious harm.

The aim of information sharing under the ISG is to protect and promote the safety and wellbeing of children, young people and their families. This site works with parents/caregivers and other agencies/services to achieve that aim. Parents /caregivers are strongly encouraged to share all information relevant to their child's capacity to enjoy and benefit from education:

- By using the 'any other information' section of this form; and/or
- In discussion with staff at the time of enrolment; and/or
- In discussion with staff at any time in the future.

Has the person conducting the interview explained the Information Privacy Statement and Information Sharing Statement?

Parent/Guardian signature

Refer to the occupation groups listed below when completing the questions on page 3.

Group 4 Other Occupations	Group 3 Trades and advanced / intermediate clerical, sales and service staff	Group 2 Other business managers, Arts / Media/ Sportspersons and associate Professionals	Group 1 Senior management in large business organisation, government administration and defence, and qualified professionals
<p>Drivers Mobile plant, Production/ Processing, Machinery, Other machinery Operators.</p> <p>Hospitality staff Hotel service supervisor, Receptionist, Waiter, Bar attendant, Kitchen hand, Porter, Housekeeper.</p> <p>Office assistants Typist, Word processing, Data entry, Business Machine Operator, Receptionist, Office assistant.</p> <p>Sales assistants Sales assistant, Motor vehicle/ Caravan/ Parts Salesperson, Checkout operator, Cashier, Bus/train conductor, Ticket seller, Service station attendant, Car rental desk staff street, Vendor, Telemarketer, Shelf stacker.</p> <p>Assistant/aide Trade's assistant, School/ Teacher's aide, Dental assistant, Veterinary nurse, Nursing assistant, Museum/gallery attendant, Usher, Home helper, Salon assistant, Animal attendant.</p> <p>Labourers and related workers</p> <p>Defence Forces Other ranks below senior NCO not included above.</p> <p>Agriculture, horticulture, forestry, fishing, mining worker Farm overseer, Shearer, Wool/hide classer, Farm hand, Horse trainer, Nurseryman, Greenkeeper, Gardener, Tree surgeon, Forestry/logging worker, Miner, Seafarer/fishing hand.</p> <p>Other worker Labourer, Factory hand, Storeman, Guard, cleaner, Caretaker, Laundry worker, Trolley collector, Car park Attendant, Crossing Supervisor.</p>	<p>Tradesmen/women Generally have completed a 4 year Trade Certificate, usually by apprenticeship. All tradesmen/women are included in this group.</p> <p>Clerks Bookkeeper, Bank/ PO clerk, Statistical/ Actuarial Clerk, Accounting/ claims/ audit clerk, Payroll clerk, Recording/ registry/ filing clerk, Betting clerk, Stores/ inventory clerk, Purchasing/ order clerk, Freight/ transport/ shipping clerk, Bond clerk, Customs agent, Customer services clerk, Admissions clerk.</p> <p>Skilled Office Staff Secretary, Personal assistant, Desktop publishing operator, Switchboard operator.</p> <p>Skilled Sales Staff Company sales representative, Auctioneer, Insurance agent/ Assessor/ Loss adjuster, Market researcher.</p> <p>Skilled Service Staff Aged/ Disabled/ Refuge/ Child care worker, Nanny, Meter reader, Parking inspector, Postal worker, Courier, Travel agent, Tour guide, Flight attendant, Fitness instructor, Casino dealer/supervisor.</p>	<p>Owner/manager Farm, Construction, Import/ Export, Wholesale, Manufacturing, Transport, Real estate business.</p> <p>Specialist manager Finance, Engineering, Production, Personnel, Industrial relations, Sales/marketing.</p> <p>Financial services manager Bank branch manager, Finance/ investment/ insurance, Broker, Credit/ loans officer.</p> <p>Retail sales/services manager Shop petrol station, Restaurant club, Hotel/ Motel, Cinema, Theatre agency.</p> <p>Arts/media/sports Musician, Actor, Dancer, Painter, Potter, Sculptor, Journalist, Author, Media presenter photographer, Designer, Illustrator, Proof reader sportsman/woman, Coach trainer, Sports official.</p> <p>Associate professionals Generally have diploma/ Technical qualifications, Support managers and professionals.</p> <p>Health, Education, Law, Social Welfare, Engineering, Science, Computing Technician/ Associate professional.</p> <p>Business/administration Recruitment/ Employment/ Industrial relations/ Training officer. Marketing/ Advertising specialist, Market research analyst, Technical sales representative, Retail buyer, Office/project manager.</p> <p>Defence Forces Senior Non-Commissioned officer.</p>	<p>Senior executive/ manager/ department head in industry, commerce, media or other large organisation.</p> <p>Public service manager (Section head or above), Regional Director, Health/ Education/ Police/ Fire services, Administrator.</p> <p>Other administrator School Principal, Faculty head/Dean, Library/Museum/Gallery director, Research facility director.</p> <p>Defence Forces Commissioned Officer.</p> <p>Professionals Generally have degree or higher qualifications and experience in applying this knowledge to:</p> <ul style="list-style-type: none"> • Design, develop or operate complex systems; • Identify, treat and advise on problems; • And teach others. <p>Health, Education, Law, Social Welfare, Engineering, Science, Computing. Professional.</p> <p>Business Management consultant, Business analyst, Accountant, Auditor, Policy analyst, Actuary, Valuer.</p> <p>Air/sea transport Aircraft/ship's Captain/ Officer/ Pilot, Flight officer, Flying instructor, Air traffic controller.</p>
<p>Parent's education, qualification and occupation</p> <p>The questions about each parent/guardian's education, qualifications and employment group are asked on all school enrolment forms.</p> <p>In South Australia this information is used in determining each school's Index of Educational Disadvantage (IED), which is linked to funding levels and may be used to allocate resources to Preschool services. In the future this information may be used to determine resource allocations to Preschools.</p>			

Biological Parent 1 or Legal Guardian 1

Mr/Mrs/Ms/Other:
Family Name:
Given Names:

Sex: Male Female

Relationship to student:

Employment Status:

Occupation:

* What is the occupation group of parent 1/ guardian 1?
Please select the appropriate parental occupation group from the list on page 2.

- If the person is not currently in paid work but has had a job in the last 12 months or has retired in the last 12 months, please use the person's last occupation.
- If the person has not been in paid work in the last 12 months, enter 8 above.

Work Location:

Work Phone Number:

P/G1 Mobile Phone:

* What is the highest year of primary or secondary school the parent 1 / guardian 1 has completed? (For persons who never attended school, select 'Year 9 or equivalent or below'.)

- Year 12 or equivalent 4
- Year 11 or equivalent 3
- Year 10 or equivalent 2
- Year 9 or equivalent or below 1

* What is the level of the highest qualification the parent 1/ guardian 1 has completed?

- Bachelor degree or above 7
- Advanced diploma / Diploma 6
- Certificate I to IV (including trade certificate) 5
- No non-school qualification 8

In which country was the parent 1/ guardian 1 born?

If not born in Australia, what was the date the parent 1/ guardian 1 arrived in Australia?

* Does the parent 1/ guardian 1 speak a language other than English at home?

No, English only Yes

If **yes**, what is the main language the parent 1/ guardian 1 speaks at home?

Does this Parent or Guardian require an interpreter? No Yes

Translation required: No Yes

Language for Translation:

What is the cultural background of Parent 1 / Guardian 1?

Biological Parent 2 or Legal Guardian 2 (optional)

Mr/Mrs/Ms/Other:
Family Name:
Given Names:

Sex: Male Female

Relationship to student:

Employment Status:

Occupation:

* What is the occupation group of parent 2 / guardian 2?
Please select the appropriate parental occupation group from the list on page 2.

- If the person is not currently in paid work but has had a job in the last 12 months or has retired in the last 12 months, please use the person's last occupation.
- If the person has not been in paid work in the last 12 months, enter 8 above.

Work Location:

Work Phone Number:

P/G2 Mobile Phone:

* What is the highest year of primary or secondary school the parent 2 / guardian 2 has completed? (For persons who never attended school, select 'Year 9 or equivalent or below'.)

- Year 12 or equivalent 4
- Year 11 or equivalent 3
- Year 10 or equivalent 2
- Year 9 or equivalent or below 1

* What is the level of the highest qualification the parent 2 / guardian 2 has completed?

- Bachelor degree or above 7
- Advanced diploma / Diploma 6
- Certificate I to IV (including trade certificate) 5
- No non-school qualification 8

In which country was the parent 2 / guardian 2 born?

If not born in Australia, what was the date the parent 2 / guardian 2 arrived in Australia?

* Does the parent 2 / guardian 2 speak a language other than English at home?

No, English only Yes

If **yes**, what is the main language the parent 2/ guardian 2 speaks at home?

Does this Parent or Guardian require an interpreter? No Yes

Translation required: No Yes

Language for Translation:

What is the cultural background of Parent 2 / Guardian 2?

Student Personal Details

Family Name:
 Given Names:
 Preferred Name:

Date of Birth: Has proof of Birth been provided? No Yes
 * Sex Male Female

How far does the student live from the School?

Has this student been approved for School Card Assistance at his/her previous school?
 No Yes

* Is the student of Australian Aboriginal or Torres Strait Islander origin?
(For persons of both Australian Aboriginal or Torres Strait Islander origin, tick both 'Yes' boxes.)
 No Yes, Australian Aboriginal Yes, Torres Strait Island

What is the student's previous school?
*If overseas, nominate country. If interstate, nominate state.
 If no previous school, nominate preschool, kindergarten, etc.*

* In which country was the student born?
 Australia Other – please specify

For a student born Overseas with a date of Arrival in Australia on or after 1/1/2006, a "Visa subclass" must be entered. Refer to Visa in passport or visa grant letter for e-visas. Some temporary residents are required to pay fees and must have a letter of offer/confirmation from International Education Services. Refer Overseas Student Factsheet: <http://ssonet.sa.edu.au>. – Select Administration, Data/Info Services, School Information, Factsheets.

If other, on what date did the student arrive in Australia?

Visa Sub-class: Religion: (Optional)

Refugee: Permission to Flag? No Yes

What is the student's cultural background?

Does the site need to be aware of any cultural and/or religious requirements? Please advise:

* Does the student speak a language other than English at home?
 No, English only Yes

If Yes, what languages (including English) does the student speak at home?
 Main language Other language/s

Does the student attend an after hours Ethnic School?
 No Yes

If Yes, which school? Which language is studied?

Is this student under the Guardianship of the Minister for Families and Communities (GoM) or in Alternative Care?
 No Yes

If Yes, further details must be obtained from the confidential Families SA-DECD Information Sharing Form as supplied to the school principal by the child/student's Families SA caseworker. This form will provide the necessary information for data input.

Does this student receive AUSTUDY? No Yes
 Does this student receive ABSTUDY? No Yes

School Use Only

School No:

ED ID:

Student ID:

School Year Level:

Census Year Level:

Roll Class:

FTE:

Campus:

House:

Enrolment Date:

Permanent Resident:

Origin:

Visa Sub-Class:

NESB:

EALD:

Family Details

Family Phone Number: Silent? No Yes

Family Mobile Phone:

Family Email Address:

Student Address Details (Please provide proof of Residence)

Mailing Address (Of Parent/Guardian with whom student lives)

Mailing Title:

Address Line 1:

Address Line 2:

Suburb/Town:

Postcode: Student Mobile Phone:

Country:

(If not Australia)

Hundred: *

Section: *

RAPID No:

(If applicable)

UHF: MHz

Student's Email Address

Residential Address (If different from Mailing Address)

Mailing Title:

Address Line 1:

Address Line 2:

Suburb/Town:

Postcode: Student Mobile Phone:

Country:

(If not Australia)

Hundred: *

Section: *

RAPID No:

(If applicable)

UHF: MHz

Student's Email Address:

If you have other addresses which need to be documented (B – Billing, H – Holiday, S – SACE Mail, T – Term) please note in any other information/comments page 8.

Has proof of Residence Documentation been provided? Yes No

Emergency Contacts if Parent or Guardian cannot be contacted or unable to collect student.

Note: Includes permission to provide overnight care.

Priority

1. Name: Home Phone: Silent

Relationship: Mobile Phone:
 Work Phone: Ext:

Priority

2. Name: Home Phone: Silent

Relationship: Mobile Phone:
 Work Phone: Ext:

Priority

3. Name: Home Phone: Silent

Relationship: Mobile Phone:
 Work Phone: Ext:

Priority

4. Name: Home Phone: Silent

Relationship: Mobile Phone:
 Work Phone: Ext:

Transport to School

Usual mode of transport: Bus Pass No:
School Bus Route AM1: Stop: Time: : :
School Bus Route AM2: Stop: Time: : :
School Bus Route PM1: Stop: Time: : :
School Bus Route PM2: Stop: Time: : :
Conveyance Allowance: (Approval Number) Allowance Expiry Date: : :
Vehicle Reg. No: Driver if other student:

Medical Conditions

Does your child have a diagnosed medical condition which might need first aid? No Yes
If **Yes**, please tick relevant conditions:
Acquired Brain Injury Severe Allergy Anaphylaxis Asthma Heart Condition Cystic Fibrosis Continence
Cerebral Palsy Diabetes Gastrostomy Joint Conditions Mild Allergy Medication
Oral Eating and Drinking Oncology Seizures Transfer and Positioning Visually Impaired Other
Other (specify) _____
Does your child need extra routine health support?
(e.g. support with medication management, continence care, psychological issues) No Yes
If Yes, the school will need a health care plan from the treating doctor/health professional.
Is plan attached? No Yes

Court Orders

Are there any current Court-sanctioned orders relating to this student? No Yes

* If Yes, please attach a copy of the order for the school's records.

On what date was the Full Court order issued?

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Details:

Other Parent/Guardian/Carer not residing at same address as student

Mr/Mrs/Ms/Other	<input style="width: 100%;" type="text"/>	Sex:	Male <input type="checkbox"/>	Female <input type="checkbox"/>						
Family Name:	<input style="width: 100%;" type="text"/>	Phone Number:	Silent <input type="checkbox"/>							
Given Names:	<input style="width: 100%;" type="text"/>	<table border="1" style="width: 100%; border-collapse: collapse; margin-left: 20px;"> <tr> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 60px; height: 20px;"></td> </tr> <tr> <td style="text-align: center; font-size: 8px;">IDD</td> <td style="text-align: center; font-size: 8px;">Area</td> <td></td> </tr> </table>						IDD	Area	
IDD	Area									
Relationship to student	<input style="width: 100%;" type="text"/>	Mobile Phone:								
Mailing Title:	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>								
Address Line 1:	<input style="width: 100%;" type="text"/>									
Address Line 2:	<input style="width: 100%;" type="text"/>									
Address Line 3:	<input style="width: 100%;" type="text"/>									
Suburb/Town:	<input style="width: 100%;" type="text"/>									
Postcode:	<input style="width: 100%;" type="text"/>									
Country:	<input style="width: 100%;" type="text"/>									
Email Address:	<input style="width: 100%;" type="text"/>									

Brothers and Sisters

Full Name	Sex	Date of Birth	Attends this School?			
<input style="width: 100%;" type="text"/>	Male <input type="checkbox"/> Female <input type="checkbox"/>	<table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table>				<input type="checkbox"/> No <input type="checkbox"/> Yes
<input style="width: 100%;" type="text"/>	Male <input type="checkbox"/> Female <input type="checkbox"/>	<table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table>				<input type="checkbox"/> No <input type="checkbox"/> Yes
<input style="width: 100%;" type="text"/>	Male <input type="checkbox"/> Female <input type="checkbox"/>	<table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table>				<input type="checkbox"/> No <input type="checkbox"/> Yes
<input style="width: 100%;" type="text"/>	Male <input type="checkbox"/> Female <input type="checkbox"/>	<table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table>				<input type="checkbox"/> No <input type="checkbox"/> Yes

Other Schools Attended

Has your child previously attended a Department for Education and Child Development kindy/school? No Yes

If Yes, please specify the last Department for Education and Child Development kindy/school attended:

List the two most recent schools attended. If unsure of dates, please estimate.

Kindy/ School	From	To
<input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/>
<input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/>

Any other information/comments

Parent/Guardian Signatures

by signing this form you certify that all information given is true and accurate

Signature of Biological Parent 1 / Legal Guardian 1:
Date: | |

Signature of Biological Parent 2 / Legal Guardian 2:
Date: | |

Enrolment Interviewer:

Data Entry Person:

NORTH INGLE SCHOOL
CONSENT FOR PHOTOGRAPHS AND PUBLICATION OF STUDENT WORK

At North Ingle School photographs or video footage of children/students and their learning are taken in school and places where the children are involved in an excursion or activity. These photos/images/videos may be used for a variety of promotional activities, including publications, promotional materials, newsletters, displays, the end of year Annual Report, journals or on the school web site, for the duration of their schooling at North Ingle.

We would like to obtain your consent before including your child in any such publication or display. In most circumstances the images will not include any personal information regarding the student's identity. However, in the school newsletters, because of limited circulation of these documents, it is usual for the student's name to appear under photographs or to record student achievement in various activities or beneath examples of student work.

I give/do not give consent for my child's (name) _____
video/photos/other images taken by the School and Department of Education and Children Development (DECD)
for a variety of promotional activities, including for publications, promotional materials, newsletters, displays, the
end of year Annual Report, journals or on the school web site, for the duration of their schooling at North Ingle.

(Parent/Caregiver)

Date ____/____/____

We thank you in anticipation of completion of this form

North Ingle School Administration

NORTH INGLE SCHOOL CYBER-SAFETY INTERNET USE AGREEMENT

To the Parent/Caregiver/Legal Guardian:

Please read this page carefully to check that you understand your responsibilities under this agreement.

I understand that North Ingle School will:

- do its best to enhance learning through the safe use of ICTs. This includes working to restrict access to inappropriate, illegal or harmful material on the Internet or on ICT equipment/devices at school or at school related activities
- work with children and their families to encourage and develop an understanding of the importance of cyber-safety through education designed to complement and support the Use Agreement initiative. This includes providing children with strategies to keep themselves safe in a connected online world
- respond to any breaches in an appropriate manner
- welcome enquiries at any time from parents/caregivers/legal guardians or children about cyber-safety issues.

My responsibilities include:

- discussing the information about cyber-safety with my child and explaining why it is important
- supporting the school’s cyber-safety/internet program by emphasising to my child the need to follow the cyber-safety strategies (available on school website)
- contacting the principal or teacher to discuss any questions I may have about cyber-safety and/or this Use Agreement.

CYBER-SAFETY USE AGREEMENT

I have read and understood this Cyber-safety Use Agreement and I am aware of the school’s initiatives to maintain a cyber-safe learning environment.

Name of child.....

Name of parent/caregiver/legal guardian.....

Signature of parent/caregiver/legal guardian.....Date.....

Please note: This agreement will remain in force for the duration of your child’s schooling at North Ingle. If it becomes necessary to add/amend any information or rule, you will be advised in writing.

**NORTH INGLE SCHOOL - RECEPTION TO YR 7
GENERAL CONSENT FORM**

(This form will cover your child throughout his/her schooling at North Ingle)

Schools often need to seek parental permission to cover a wide range of activities and situations. We hope that by placing most of the potential situations on one sheet it will save time and paper. Please read, circle preferred option, sign and date. Thank you.

CHILD'S NAME: _____

PERMISSION TO BORROW LIBRARY BOOKS

I do/do not give permission for my child to borrow from the library and accept responsibility for any book damaged or lost by my child.

PERMISSION TO GO ON LOCAL WALKS

I do/do not give permission for my child to go on supervised local walks during the school year for educational purposes.

PERMISSION TO BE PHOTOGRAPHED

I do/do not give permission for my child to be photographed/videoed for school purposes whilst attending North Ingle School. I also give permission for my child's name to be included.

PERMISSION TO APPLY SUNSCREEN

I do/do not give permission for my child to apply sunscreen provided in the classroom.

CONSENT TO INSPECT FOR HEADLICE

The South Australian Health Commission recommends that everyone checks their hair every week for headlice. Checking and treating children's hair is **BY LAW A PARENT'S RESPONSIBILITY**. Sometimes schools offer to arrange head checks if there is a community outbreak of headlice.

(Please tick)

I understand and accept that if my child is found to be infested they will be withdrawn from close contact with other children until collected for treatment by parents or caregivers. I understand that I will need to collect my child promptly if headlice are evident as a result of this check.

I give permission for School Council Approved people to check my child's hair for headlice. I understand any such check will be conducted sensitively.

OR

I do not give permission for the school to have my child's hair checked for headlice. I will do this. I understand that my child can be excluded from school where infestation is suspected. I understand it is my responsibility to arrange collection of my child from school when notified.

SCHOOL YARD SUPERVISION

I understand that the school yard is supervised from 8:30am until 3:20pm and that the school cannot accept responsibility for children in the yard outside of these hours.

MATERIAL & SERVICES CHARGES

I understand that I must either pay the Material & Services charges or apply for School Card at the front office at the start of every year. I understand that I can negotiate with the school to pay over a period of time. I understand that Material & Services charges are compulsory payments and all unpaid accounts will be handed to your collection agency for recovery of outstanding debts.

Parent/Guardian Signature: _____ Date: _____

Signature for all consent details listed above