



Open Night

September 9th, 2009 5.30pm to 7.30pm

This is an opportunity to experience the school environment, see aspects of the school programme in action and talk to the Board, staff and students.

Enrolment Time Line

Enrolments close: 24th September

Enrolments confirmed: 15th October

APPLICATION FOR ADMISSION

1. Date of application ___ / ___ / ___ Commencement date ___ / ___ / ___ Year _____

2. Family name _____ First Names _____

3. Address of applicant _____
 _____ Postal Code: _____

4. Current school _____ City/District of current school _____

5. Male Female 6. Date of Birth ___ / ___ / ___

7. NZ European Maori Iwi (up to 3 Iwi's) _____
 _____ Other (specify) _____

8. Full Name of Mother/Caregiver _____ Mobile Phone _____
 Occupation _____ Home Phone _____ Work Phone _____

9. Full Name of Father/Caregiver _____ Mobile Phone _____
 Occupation _____ Home Phone _____ Work Phone _____

10. If not living with parents/caregiver with whom the student will reside _____
 Address _____ Phone _____

11. Health remarks _____ Doctor _____

I give permission for my child to be given Paracetamol if required. Medical Centre _____

12. I give permission for Gisborne Intermediate to make legitimate use of records held by the school.
 Email address _____

Signed _____ Date ___ / ___ / ___ Copy of Birth Certificate
 or passport attached.

POST TO :

Enrolment, Gisborne Intermediate School, Roebuck Road, Gisborne, 4010

OFFICE USE ONLY

Received: _____

Enrolment Number: _____

Year: _____ Room: _____

Teacher: _____

EMERGENCY PHONE NUMBERS

1: _____

2: _____

3: _____

4: _____