



Student's Surname: Student's Given Name/s:

Siblings (if changes apply to them):

Parent / Guardian Details

Enrolling Parent 1	Enrolling Parent 2
Name:	Name:
Phone Number:	Phone Number:
Email:	Email:
Work Location:	Work Location:
Work Phone Number:	Work Phone Number:

Please note that under the Education and Children's Services Act 2019 (SA) we require the following documentation when an address change is needed.

If you own your residence -

- A copy of the contract of sale or recent council rates notice and a recent gas or electrical bill.

If you are renting your residence –

- A rental agreement that covers the first 12 months at the school and a bond receipt lodged with Consumer and Business Services and a recent gas or electricity bill for the property.

Residential	Name for correspondence: Address: Suburb: Postcode:
Mailing	Name for correspondence: Address: Suburb: Postcode:
Billing	Name for correspondence: Address: Suburb: Postcode:

Emergency Contacts

1. Name:	Relationship to Student:	Phone:
2. Name:	Relationship to Student:	Phone:
3. Name:	Relationship to Student:	Phone:
4. Name:	Relationship to Student:	Phone:

Court Orders (Please supply a copy for our records)

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Medical Information (Please provide an updated medical/health plan)

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Changes to parent/guardian not residing with student

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Other relevant information (e.g. visa details)

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I declare the information provided above is true and accurate.

Parent / Caregiver Name: Signature: Date: / / 20.....

EDSAS Updated	Date	By whom (print name): Signature:
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