



**Return with
application
form**

Student Name _____

Riverside Christian College
23 Royle Street, Maryborough West
PO Box 2069, Maryborough DC 4650

Phone: Day School: 07 4123 1031
Distance Education: 07 4123 5599
Fax: 07 4123 2545
Web site: www.riverside.qld.edu.au
Email: college@riverside.qld.edu.au

OFFICE USE ONLY:

D.O.B.: _____

Student Number: _____

Sports Term: _____

Other _____

Riverside Christian College

Application for Enrolment (b)

Riverside acknowledges that families come in a variety of forms. A number of children today do not live with both of their natural parents. Residential parent/s may choose to provide information about non-residential parent/s, and what contact they may have with the College and/or student.

Family Details	
Are there any special residential arrangements (eg access arrangements, shared custody):	

RESIDENTIAL PARENTS/CARERS

MALE PARENT/CARER			
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Title:		First Name:	
Last Name:			
Relationship to the Student:			
Address (residential):			
Address (mail):			
Telephone (home):			
Telephone (work):			
Telephone (mobile):			
Email:			
Workplace Location:			
Employer:			
Regular Church Attendee:		<input type="checkbox"/> Yes <input type="checkbox"/> No	
Church:			

FEMALE PARENT/CARER			
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Title:		First Name:	
Last Name:			
Relationship to the Student:			
Address (residential):			
Address (mail):			
Telephone (home):			
Telephone (work):			
Telephone (mobile):			
Email:			
Workplace Location:			
Employer:			
Regular Church Attendee:		<input type="checkbox"/> Yes <input type="checkbox"/> No	
Church:			

NON-RESIDENTAL PARENTS/CARERS

NON-RESIDENTAL FEMALE PARENT or CARER

Title:		First Name:	
Last Name:			
Relationship to the Student:			
Address (residential):			
Address (mail):			
Telephone (home):			
Telephone (work):			
Telephone (mobile):			
Email:			
Workplace Location:			
Employer:			
Regular Church Attendee:		<input type="checkbox"/> Yes <input type="checkbox"/> No	
Church:			
Should this person be contacted with:			
General Correspondence:		<input type="checkbox"/> Yes <input type="checkbox"/> No	
Reports:		<input type="checkbox"/> Yes <input type="checkbox"/> No	
Accounts:		<input type="checkbox"/> Yes <input type="checkbox"/> No	
Can this person:			
Request information about this student?		<input type="checkbox"/> Yes <input type="checkbox"/> No	
Contact the student at school?		<input type="checkbox"/> Yes <input type="checkbox"/> No	

NON-RESIDENTAL MALE PARENT or CARER

Title:		First Name:	
Last Name:			
Relationship to the Student:			
Address (residential):			
Address (mail):			
Telephone (home):			
Telephone (work):			
Telephone (mobile):			
Email:			
Workplace Location:			
Employer:			
Regular Church Attendee:		<input type="checkbox"/> Yes <input type="checkbox"/> No	
Church:			
Should this person be contacted with:			
General Correspondence:		<input type="checkbox"/> Yes <input type="checkbox"/> No	
Reports:		<input type="checkbox"/> Yes <input type="checkbox"/> No	
Accounts:		<input type="checkbox"/> Yes <input type="checkbox"/> No	
Can this person:			
Request information about this student?		<input type="checkbox"/> Yes <input type="checkbox"/> No	
Contact the student at school?		<input type="checkbox"/> Yes <input type="checkbox"/> No	

Name of Student: _____

Please give reasons for wanting to enrol your child at Riverside Christian College _____

Private schooling will incur a cost. Do you foresee any problem in this area? _____

If yes, please give details _____

Who will be responsible for the fees? _____

Contact details (if not previously given) _____

Enrolment Deposit:

This application does not guarantee entry into Riverside Christian College, but places your child on an interview list. An enrolment deposit of \$350.00 is payable with your application form under the following conditions:

- the deposit is non-refundable if you withdraw your application for enrolment at Riverside; OR
- the deposit will be refunded if Riverside considers that it does not have the professional expertise available to provide the best educational opportunity for your child's needs; OR
- ***the deposit will be credited to your initial fees account upon enrolment at Riverside.***

Privacy:

All information collected by Riverside Christian College regarding your child is done so to support their enrolment at the College, and is subject to the terms of the *Privacy Amendment (Private Sector) Act 2000*. A copy of the Privacy Statement has been included with the enrolment package, and is also available from Riverside Christian College.



***I/We declare that we wish to enrol my/our child into Riverside Christian College.
I/We have fully and accurately disclosed any information required by the College for its consideration in determining the enrolment of my child.
I/We enclose an enrolment deposit of \$350.00, and understand that this deposit is not refundable should I/we withdraw this application to the College.***

Name of Parent/Carer _____

Signature of Parent / Carer _____ Date _____

Name of Parent / Carer _____

Signature of Parent / Carer _____ Date _____