

# ENROLMENT ACCEPTANCE FORM

## Parent/Carer 1

Title: ..... Given name: ..... Surname: .....

## Parent/Carer 2

Title: ..... Given name: ..... Surname: .....

## Enrolled Students

Student 1: ..... Year level: .....

Student 2: ..... Year level: .....

Student 3: ..... Year level: .....

Student 4: ..... Year level: .....

## Parent/Carer Agreement

In accepting a place for the above named student(s) at Bayside Christian College, we/I agree (please tick & sign):

- ☐ That we/I understand that Bayside Christian College is a Christian school where our/my children(ren) will receive a Biblical, Christ-centred education in accordance with the College's Faith Statement.
- ☐ To uphold the policies and practices of the College in both word and deed.
- ☐ To resolve any grievance or dispute within the College in accordance with the College Grievance Policy.
- ☐ That the College may contact the previous school/s of our/my child(ren) to obtain information pertinent to their education (if applicable).
- ☐ To obtain a professional assessment for our/my child(ren) (where requested).

Parent/Carer 1 signature: ..... Date: .....

Parent/Carer 2 signature: ..... Date: .....

## Parent/Carer Fees Declaration

Please indicate who is responsible for the payment of College tuition fees and charges:

- ☐ Parent/Carer 1 & 2                      ☐ Parent/Carer 1 only                      ☐ Parent/Carer 2 only

Other (specify): .....

In accepting a place for the above named student(s) at Bayside Christian College, we/I agree (please tick & sign):

- ☐ To pay the Bayside Christian College Family Enrolment Bond of \$500 within 14 days of receiving a letter of offer of a position for our/my child(ren) at the College.
- ☐ To pay all College fees and charges each year in accordance with the payment schedule agreed upon in the Payment Arrangement Form.
- ☐ To provide, in writing to the Principal, one full term's notice of withdrawal of our/my child(ren) from Bayside Christian College, or to pay one full term's fees (ten weeks) in lieu of notice.
- ☐ To accept liability for any costs incurred by the College in collecting unpaid fees and charges when the child(ren) leave or are withdrawn from the College.

Parent/Carer 1 signature: ..... Date: .....

Parent/Carer 2 signature: ..... Date: .....