

Casuarina Steiner School

Inspiring the Head, reaching the Heart



Casuarina School Co-operative Ltd
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Enrolment Application

Student Enrolment

Students Name:
(First Names) (Last Name)

Preferred Name: Household Representative:

Date of Birth:/...../..... Gender: ☐ M ☐ F
Preferred identified gender

Academic year upon entry: Calendar year of entry:

Current school/preschool;

Country of Birth: Nationality:

Residential Address;
(Street) (Town/City) (State) (Postcode)

Student Details

Are there any siblings enrolled at Casuarina? ☐ Yes ☐ No

Names of Siblings:

Does this student have Australian Citizenship OR Permanent Resident Status? ☐ Yes ☐ No

If NO please provide copy of Passport. (Overseas fees will apply)

Visa Class & Sub Class No.

Is the student a full fee paying overseas student? ☐ Yes ☐ No

Is the student of Aboriginal or Torres Strait Islander origin? ☐ Yes ☐ No
☐ Aboriginal ☐ Torres Strait Islander

Does the student speak a language other than English at home? ☐ Yes ☐ No
(Language)

Custody/Guardianship

Student lives with: ☐ Both Parents ☐ Parent 1 ☐ Parent 2 ☐ Other (please specify)

Name of person(s) with legal custody/guardianship of the student:

Is a Parenting or Restraint Order applicable? ☐ Yes ☐ No If yes please supply a copy

Are any other conditions enforced at law? ☐ Yes ☐ No

Please list below any special family circumstances of which the School needs to be aware in order to provide maximum support to the student.

Parent Information

Parent/Guardian 1: Relationship to Student:

Name:
(Title) (First Name) (Last Name)

Postal Address:

Residential Address:
(Street) (Town/City) (State) (Postcode)

Country of Birth: Language: ☐ English ☐ Other

Occupation: Employer:

Work Phone: Mobile:

Email: Home Phone:

Parent/Guardian 2: Relationship to Student:

Name:
(Title) (First Name) (Last Name)

Postal Address:

Residential Address:
(Street) (Town/City) (State) (Postcode)

Country of Birth: Language: ☐ English ☐ Other

Occupation: Employer:

Work Phone: Mobile:

Email: Home Phone:

Additional Family Information

Other family members living with student:(eg Step Mother/Step Father) ☐ Yes ☐ No If yes, details below

Name: Relationship:

Contact Details:
(mobile) (email address)

Are separate copies of reports required for each parent/guardian? ☐Yes ☐ No

If so, and when necessary, an additional copy is to be sent to:

Name:

Learning Support

Are there any details the school should know about your child that may have relevance at school in regards to:

Language and Speech development:	<input type="checkbox"/> Yes <input type="checkbox"/> No
Development of gross motor skills and coordination:	<input type="checkbox"/> Yes <input type="checkbox"/> No
Development of fine motor skills:	<input type="checkbox"/> Yes <input type="checkbox"/> No
Vision and hearing:	<input type="checkbox"/> Yes <input type="checkbox"/> No
A diagnosed disability:	<input type="checkbox"/> Yes <input type="checkbox"/> No
Psychological Assessment?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Other :	<input type="checkbox"/> Yes <input type="checkbox"/> No

Does your child have any special needs that may be relevant to their education? Please indicate below by placing a tick in the appropriate boxes. Please attach appropriate documentary information.

English as a second language	<input type="checkbox"/>	Numeracy Difficulties	<input type="checkbox"/>
Literacy Difficulties	<input type="checkbox"/>	Any Special Needs	<input type="checkbox"/>

Other (please provide details)

If you have ticked yes in any of the above boxes please bring details and any relevant reports to the Class teacher to enrolment interview.

Photograph/Video Consent (To be updated annually)

At certain times throughout the year, our students may have the opportunity to be photographed or filmed for our school publications, such as the school's newsletter or website and social media, or to promote the school in newspapers and other media.

Casuarina Steiner School may also wish to use student photographs/videos in print and in online promotional, marketing, media and educational materials.

We would like your permission to use your child's photograph/video for the above purposes. Please complete the permission form below and return to the school as soon as possible.

Thank you for your continued support.

Student Name: _____ Class: _____

- ♦ I give permission for my child's photograph/video and name to be published:

The school's website	Yes / No
Social Media	Yes / No
Promotional materials	Yes / No
Newspapers and other media	Yes / No

- ♦ I authorise Casuarina Steiner School to use the photograph/video in the agreed publications without acknowledgement, remuneration or compensation.
- ♦ I understand and agree that if I do not wish to consent to my child's photograph/video appearing in any or all of the publications above, or if I wish to withdraw this authorisation and consent, it is my responsibility to notify the school.

Parent/Guardian _____ Signature _____

/ /

Casuarina Steiner School - Conditions of Enrolment

1. I/We have read and understood and agree to be bound by Casuarina Steiner Schools financial terms and conditions attached to this offer of enrolment. I/We agree to be responsible for the payment of all fees and charges as indicated in the financial terms and conditions and I/we agree to pay the Enrolment Fee before the commencement of enrolment.
2. I/We understand that the enrolment fee accompanying this application is non-refundable.
3. I/We agree to support the ethos, philosophy and practices of Casuarina Steiner School, including but not limited to taking part in school activities.
4. I/We agree to accept the rules and practices of the school as detailed in the Student Welfare and Discipline Policy, Dress Code Policy.
5. The school Board or Principal may require you to remove your child from Casuarina Steiner School, if the Board or Principal believes that a mutually beneficial relationship of trust and cooperation between you and the school has broken down to the extent that is adversely impacts on this relationship.
6. I/We acknowledge that I/we have received a copy of the current prospectus informing me/us of the aims of the school and detailing its activities, please note that possible future amendments to the program and activities can occur.
7. I/We agree to permit our child to participate in educational excursions, outside the school, and in addition, to participate in extra-curricular activities both in and out of the school, as approved by the Principal. Parents will be informed beforehand of excursions and must inform the teacher if their child is unable to attend
8. I/We understand that if withdrawing my child from the School, one full term's notice should be supplied in writing to the Principal, or four week's applicable fee will be charged.
9. I/We understand that acceptance of my child/children will depend on the outcome of the enrolment process and availability of places in the school, and that this enrolment process does not ensure enrolment.
10. I/We understand that we must advise the School immediately if there is any change to personal information that you have provided to the School in this application.
11. I/We understand that in the event of my child being absent without prior notice for illness, or any other reason whatever, the School should immediately be advised by telephone or by letter addressed to the Principal. If I/we intend to take extended leave for travel purposes we will complete an 'Application for Extended Leave – Travel' prior this time for approval by the Principal.
12. I/We understand that the Principal may, if she considers she has adequate cause for doing so, forthwith suspend or terminate my child/ren's enrolment. Should my child/ren's enrolment in any term be suspended or terminated by the School the fees payable shall be calculated to the end of term in which such suspension or termination occurs.
13. I/We understand the School will not be responsible for the loss of or damage to clothes, effects, etc of students no matter how caused. The parent will be responsible for all breakages and damage to School property caused by a student. (The cost of repairs or replacement will be added to the student's account.)
14. The Board may alter these conditions of entry at any time by providing not less than two terms notice (and will take effect from 1 January the following year).

Privacy Policy—Standard Collection Notice

Casuarina Steiner School collects personal information, including sensitive information about students and parents and/or guardians before and during the course of a student's enrolment at the School. This may be in writing or in the course of conversations. The primary purpose of collecting this information is to enable Casuarina Steiner School to provide schooling to students enrolled at the school, exercise its duty of care, and perform necessary associated administrative activities, which will enable students to take part in all the activities of the School.

Some of the information we collect is to satisfy the School's legal obligations, particularly to enable Casuarina Steiner School to discharge its duty of care.

Laws governing or relating to the operation of a school require certain information to be collected and disclosed. These include Education Act 1990, Child Protection (Working with Children) Act 2012 and Public Health Act 2010.

Health information about students is sensitive information within the terms of the Australian Privacy Principles (APP's) under the Privacy Act 1988. We may ask you to provide medical reports about students from time to time.

Privacy Policy—Standard Collection Notice

Casuarina may disclose personal and sensitive information for educational, administrative and support purposes. This may include to:

- Other schools and teachers at those schools;
- Government departments (including for policy and funding purposes);
- Medical practitioners;
- People providing educational, support and health services to Casuarina, including specialists, casual teachers, volunteers, and sports coaches;
- Providers of learning and assessment tools;
- Assessment and educational authorities, including the Australian Curriculum, Assessment and Reporting Authority (ACARA) and NAPLAN Test Administration Authorities (who will disclose it to the entity that manages the online platform for NAPLAN);
- People providing administrative and financial services to Casuarina;
- Anyone you authorise Casuarina to disclose information to; and
- Anyone to whom Casuarina is required or authorised to disclose the information to by law, including child protection laws;

Personal information collected from students is regularly disclosed to their parents or guardians;

Casuarina may use online or 'cloud' service providers to store personal information and to provide services to the School that involve the use of personal information such as services relating to email and education and assessment applications.

Some limited personal information may also be provided to service providers to enable them to authenticate users that access their services.

Casuarina Steiner School's Privacy Policy, accessible on the School's website, sets out how parents or pupils may seek access to and correction of their personal information which the school has collected and holds. However, access may be refused in certain circumstances such as where access would have an unreasonable impact on the privacy of others, where access may result in a breach of Casuarina's duty of care to the student, or where students have provided information in confidence. Any refusal will be notified in writing with reasons if appropriate.

Casuarina Steiner School's Privacy Policy also sets out how parents and pupils can make a complaint about a breach of the APPs and how the complaint will be handled.

Casuarina Steiner School will engage in fundraising activities. Information received from you may be used to make an appeal to you. (It may also be disclosed to organisations that assist in Casuarina's fundraising activities solely for that purpose.) We will not disclose your personal information to third parties for their own marketing purposes without your consent.

On occasions student information is published in the school newsletter and subsequently on social media, or the Casuarina Steiner School website, this may include photographs of class plays, camps and excursions. Casuarina Steiner School obtains permissions annually from student's parent and / or guardian to include such photographs (or other identifying material) in our promotional material or otherwise make this material available to the public such as on the internet.

Casuarina Steiner School also includes contact details of parents/guardians in a class list and class email list. This list is kept securely by Casuarina Steiner School and only used as a means of communication of information that is strictly school related. The class list / email list is given to the Class Carer in each class to co-ordinate class activities. All email communication is sent using blind copy (BCC), to maintain privacy of parents/guardians email addresses.

If you provide Casuarina Steiner School with the personal information of others, such as doctor, emergency contact, we encourage you to inform them that you are disclosing that information to Casuarina Steiner School and why.

Student Medical Information Confidential

Student Details

Students Name: Class:

Students Residential Address:

Students Date of Birth:/...../.....

Medicare Number: Position Number: Expiry Date (mm/yr)/.....

Private Medical Fund: Yes ☐ No ☐ Ambulance Cover: Yes ☐ No ☐

Medical Fund: Policy Number:

Emergency Contact Details—Next of Kin

Parent 1 Phone: Mobile:

Parent 2 Phone: Mobile:

Guardian: Phone: Mobile:

In case student becomes ill/injured and **next of kin cannot** be contacted the School has authority to contact and release the student into the care of:

Name: Relationship: Phone:

Name: Relationship: Phone:

Name: Relationship: Phone:

Doctors Details

E.g. Doctor, Dentist, Specialist

Type: Name: Phone:

Type: Name: Phone:

Type: Name: Phone:

Medical Information: Please note: It will be necessary for you to fill in a 'Request to Administer Medication' Consent Form whenever your child needs to be given medication at school.

I acknowledge that we have completed the student's Medical Information Form and details are attached to this application.

Parent/Guardian: Signed / /

If a student needs urgent hospital or medical treatment of any nature and the school is unable to contact the parent / guardian after making reasonable efforts you authorise the school to give authority for such treatment.

Medical Information

Does your child have any medical conditions, allergies or intolerances?

☐ Yes ☐ No

Please specify _____

Does your child take any regular medication?

☐ Yes ☐ No

Please specify _____

I hereby acknowledge that I have read and understood the Casuarina Steiner School Food Policy. The Policy advises the School is peanut free. I accept that traces of peanuts may be present as well as other nuts, including tree nuts, and that this Policy does not eliminate the risk of exposure.

..... **Signature**

Condition	Y/N	Severe Y/N	Signs & Symptoms	Treatment
Allergies:				
Bees/Wasps/Insects/Ants				
Medication				
Food				
Hay fever				
Anaphylaxis				
Does the allergy require use of an EpiPen? Yes No				
Conditions:				
Asthma* *If yes, please fill in asthma section over page				
Diabetes				
Epilepsy				
Muscular-skeletal				
Other:				
Hearing Problems				
Glasses/contacts				
Special Dietary Requirements				

MEDICAL ACTION PLAN

If your child has a medical condition, you must provide a Medical Action Plan from a registered medical practitioner prior to enrolment to enable us to develop your child's Individual Health Care Plan.

I/We agree to update the Medical Action Plan annually or when changes occur.

.....
Parent/Guardian name:

.....
Signature: / /

Is your child immunised? ☐ Yes ☐ No If yes (Immunisation History Statement attached) ☐ Yes ☐ No

Has your child received the COVID vaccine? ☐ Yes ☐ No

Under the Public Health Act 2010 and the Public Health Regulation 2012, primary schools must request and record the immunisation status of each enrolled child.

The Immunisation History Statement which is issued by the Australian Childhood Immunisation Register (ACIR) is required as proof of immunisation status for enrolment at school under the NSW Public Health Act 2010.

Parents can request a copy of the History Statement by calling the ACIR on 1800 653 809, requesting a statement by emailing acir@medicareaustralia.gov.au or visiting Medicare Online Services at www.medicareaustralia.gov.au/online or a local Medicare office.

*More information about the Public Health Act 2010 and Public Health Regulation 2012 is available at:
<http://www.health.nsw.gov.au/phact/Pages/default.aspx>*

If your child is not vaccinated, he or she may be excluded from school if there is an outbreak of a vaccine preventable disease.

Child Asthma Record

This form is to be completed by parents/carers, ideally in consultation with the child's doctor (general practitioner or specialist). Parents/carers should inform the service immediately if there are any changes to the child's asthma management. A new Asthma Record should be provided at the beginning of each year.

Please tick the appropriate box, and print your answers clearly in the blank spaces where indicated.

Personal Details

Child's Name _____ (first name) _____ (last name)

Gender ☐ Male ☐ Female Date of Birth ____ / ____ / ____

Emergency Contacts (eg. Parent or Carer)

1. Name _____	Relationship _____
Telephone (daytime) _____	(home) _____
2. Name _____	Relationship _____
Telephone (daytime) _____	(home) _____

Doctor's Contact Details

Name _____	Telephone _____
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Asthma Management Plan

Does the child tell the carer when he/she needs medication? ☐ Yes ☐ No

Child's Symptoms (eg cough) _____

Triggers (eg exercise, pollens) _____

Medication Requirements: (Parents need to supply asthma medication eg, puffer and spacer)

Name of Medication	Method of delivery (eg puffer & spacer)	When & How Much

In an **EMERGENCY**, follow the plan that has been ticked:

<input type="checkbox"/> Standard Asthma First Aid Plan Step 1: Sit the child upright and remain calm and provide reassurance. Do not leave the child alone. Step 2: Give 4 puffs of a blue reliever (<i>Airomir, Asmol, Epaq or Ventolin</i>), one puff at a time, through a spacer device*. Ask the child to take 4 breaths from the spacer after each puff. Step 3: Wait 4 minutes. Step 4: If there is little or no improvement, repeat steps 2 and 3. If there is still little or no improvement, call an ambulance immediately (Dial 000). Continue to repeat steps 2 and 3 while waiting for the ambulance. <small>*Use a blue reliever (<i>Airomir, Asmol, Epaq or Ventolin</i>) on its own if no spacer is available.</small>	<input type="checkbox"/> My Child's Asthma First Aid Plan As written in consultation with my child's doctor. (Full details must be attached or staff will use the Standard Asthma First Aid Plan)
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Additional Comments: _____

I authorise the staff at the service to follow the preferred Asthma First Aid Plan and assist my child with taking asthma medication should he/she require help. I will notify you in writing if there are any changes to these instructions.
 Please contact me if my child requires emergency treatment or if my child regularly has asthma symptoms whilst attending the service.

Signature of Parent/Carer _____ Date _____

Signature of Child's Doctor (recommended) _____ Date _____

Data Collection Form (information for assessment and reporting purposes)

Name of student:

Gender: Male / Female

First name:

Last name:

Is the student of Aboriginal or Torres Strait Islander origin?

(For persons of both Aboriginal and Torres Strait Islander origin, mark both 'Yes' responses.)

No ☐ ☐

Yes, Aboriginal ☐ ☐

Yes, Torres Strait Islander ☐ ☐

In which country was the student born?

Australia ☐ ☐

Other – please specify

Does the student or their parent/guardian 1 or their parent/guardian 2 speak a language other than English at home?

	student	parent1/ guardian1	parent2/ guardian2
No, English only	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>

Yes, Other – please specify

What is the highest year of primary or secondary school the parents/guardians have completed?

(For persons who have never attended school, mark 'Year 9 or equivalent or below'.)

	parent1/ guardian1	Parent2/ guardian2
Year 12 or equivalent	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
Year 11 or equivalent	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
Year 10 or equivalent	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
Year 9 or equivalent or below	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>

What is the level of the highest qualification the parents/guardians have completed?

	parent1/ guardian1	Parent2/ guardian2
Bachelor degree or above	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
Advanced diploma/Diploma	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
Certificate I to IV (including trade certificate)	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
No non-school qualification	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>

What is the occupation group of the parent1/guardian1? ☐ ☐

What is the occupation group of the parent2/guardian2? ☐ ☐

Please select the appropriate parental occupation group from the attached list (1, 2, 3 or 4).

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' in the space above.

List of Parental Occupation Groups

Group 1: Senior management in large business organisation, government administration and defence, and qualified professionals

Senior executive/manager/department head in industry, commerce, media or other large organisation
Public service manager (section head or above), regional director, health/education/police/fire services administrator
Other administrator (school principal, faculty head/dean, library/museum/gallery director, research facility director)
Defence forces Commissioned Officer
Professionals generally have degree or higher qualifications and experience in applying this knowledge to design, develop or operate complex systems; identify, treat and advise on problems; and teach others.
Health, Education, Law, Social Welfare, Engineering, Science, Computing professional
Business (management consultant, business analyst, accountant, auditor, policy analyst, actuary, valuer)
Air/sea transport (aircraft/ship's captain/officer/pilot, flight officer, flying instructor, air traffic controller)

Group 2: Other business managers, arts/media/sportspersons and associate professionals

Owner/manager of farm, construction, import/export, wholesale, manufacturing, transport, real estate business
Specialist manager (finance/engineering/production/personnel/industrial relations/sales/marketing)
Financial services manager (bank branch manager, finance/investment/insurance broker, credit/loans officer)
Retail sales/services manager (shop, petrol station, restaurant, club, hotel/motel, cinema, theatre, agency)
Arts/media/sports (musician, actor, dancer, painter, potter, sculptor, journalist, author, media presenter, photographer, designer, illustrator, proof reader, sportsman/woman, coach, trainer, sports official)
Associate professionals generally have diploma/technical qualifications and support managers and professionals.
Health, Education, Law, Social Welfare, Engineering, Science, Computing technician/associate professional
Business/administration (recruitment/employment/industrial relations/training officer, marketing/advertising specialist, market research analyst, technical sales representative, retail buyer, office/project manager)
Defence Forces senior Non-Commissioned Officer (NCO)

Group 3: Tradespeople, clerks and skilled office, sales and service staff

Tradespeople generally have completed a 4-year trade certificate, usually by apprenticeship. All tradespeople are included in this group.
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)
Skilled office, sales and service staff:
Office (secretary, personal assistant, desktop publishing operator, switchboard operator)
Sales (company sales representative, auctioneer, insurance agent/assessor/loss adjuster, market researcher)
Service (aged/disabled/refugee/child care worker, nanny, meter reader, parking inspector, postal worker, courier, travel agent, tour guide, flight attendant, fitness instructor, casino dealer/supervisor)

Group 4: Machine operators, hospitality staff, assistants, labourers and related workers

Drivers, mobile plant, production/processing machinery and other machinery operators.
Hospitality staff (hotel service supervisor, receptionist, waiter, bar attendant, kitchen-hand, porter, housekeeper)
Office assistants, sales assistants and other assistants:
Office (typist, word processing/data entry/business machine operator, receptionist, office assistant)
Sales (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)
Assistant/aide (trades assistant, school/teacher's aide, dental assistant, veterinary nurse, nursing assistant, museum/gallery attendant, usher, home helper, salon assistant, animal attendant)
Labourers and related workers
Defence Forces ranks below senior NCO not included above
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)
Other worker (labourer, factory hand, storeman, guard, cleaner, caretaker, laundry worker, trolley collector, car park attendant, crossing supervisor)

School Fee Information

Person/(s) responsible for payment of school fees:

Billing Address:
(Postal/Street) (Town/City) (State) (Postcode)

I/We enclose our payment of the Application Fee of \$175.00 per student or \$300 per family. I/We understand this fee is to cover administrative costs and is not refundable irrespective of the outcome.

- ☐ Cheque made payable to Casuarina Steiner School
☐ Cash (payable in person)
☐ Credit Card
☐ American Express

Card Number:/...../...../..... Expiry Date:/..... CCV No.

Signature of Cardholder:

CONDITIONS OF ENROLMENT (TO BE SIGNED BY ALL PARTIES ACCEPTING RESPONSIBILITY FOR ENROLMENT) Enrolment is conditional upon the Principal being satisfied about the suitability of the student for admission.

In making application for our child to be considered to be admitted as a student at Casuarina Steiner School, I/We

..... and
hereby accept the Conditions of Enrolment, which we have read and signed together with the Student Welfare and Discipline Policy and Student Medical Information Form.

Applicants for enrolment will not be considered unless completed in full and accompanied by and immunisation report and birth certificate.

Dated thisday of.....20.....

Signed:
(Parent/Guardian 1) (Parent/Guardian 2)

To the best of my/our knowledge the above information is complete and correct. I/We acknowledge and agree that if we have knowingly withheld information relevant to the enrolment process or have knowingly incorrectly completed this application form, the School may refuse or terminate the enrolment of my/our child.

Supporting Documentation

Please also attach the following documentation prior to enrolment

- Copy of Students Birth Certificate
- Details of residency status (passport, visa etc) for students born overseas
- Copy of Immunisation records
- Your child's most recent school reports
- Any relevant learning support documentation

PLEASE RETURN this completed Application for Enrolment form, together with your child's completed immunisation record and birth certificate and the non-refundable enrolment fee of \$175.00 to:

Casuarina School Co-operative Ltd PO Box 1415 Coffs Harbour NSW 2450 (4 Gentle Street Coffs Harbour NSW 2450)