



GOLDEN OAK
PRIVATE SCHOOL

STUDENT REGISTRATION FORM 2024-2025

Student Name(s): _____ Surname: _____

Date Of Birth: _____ Gender: Male | Female Nationality/ies: _____

ID card/Passport No.: _____ Date: _____

Select below the class your child is applying to enter:

- Kindergarten (Age 2) Kindergarten (Age 3) Pre-Reception (Age 4)
 Reception (Age 5) Primary Grade 1 (Age 6) Primary Grade 2 (Age 7)

Select your child's attendance: Half Day (pick up 13.00) Full Day (pick up 16.00 or 17.30)

Lunchtime Nap (Ages 2 & 3): Yes No

Mother's (Primary Guardian's) Name & Occupation:

Home Address:

Email Address:

Phone number:

Father's (Secondary Guardian's) Name & Occupation:

Address (If different from above):

Email Address:

Phone Number:

Emergency contact name & number:

Mother's (Primary Guardian) and Father's (Secondary Guardian) Signatures:



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MEDICAL INFORMATION / LEARNING DIFFERENCES:

To help us best care for your child, please specify below if your child is using any medication, or has any educationally relevant diagnoses/concerns (eg. ADHD) or health condition (eg. allergies food/insects/bees). For allergies, please specify the extent and procedure that should be followed in case of an allergic reaction:

Paediatrician's name & number:

By signing this registration form, I confirm that I have read the School Handbook and I confirm that my child will be attending the full school year as outlined in the School Handbook. Even if my child is absent for any period of time, I confirm that I will still pay the required monthly fees. I confirm that I understand that my child's registration is complete only upon paying the required deposit and providing the required additional documents (**birth certificate/passport/health certificate/previous school report**). Please note, we have a Whatsapp group for parents where we share important information, updates and photos, so please specify if you use a different number for the Whatsapp application.

Full name of mother / primary guardian & signature:

Full name of father / secondary guardian & signature:



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I _____ give my full permission to Golden Oak Private School to take photos/videos of my child/children _____ and to post those photos on their school website, social media, or for any marketing materials they see fit.

Full name of parent:

Signature of parent:

Date Signed:
