



GOLDEN OAK
PRIVATE SCHOOL

STUDENT REGISTRATION FORM

Student Name(s): _____ Surname: _____

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

Academic Entry Year: ☐ 2025-2026 ☐ 2026-2027 ☐ 2027-2028 ☐ 2028-2029

ID card/Passport No.: _____ Place of Birth: _____

Select below the class your child is applying to enter:

<input type="radio"/> Kindergarten (Age 2)	<input type="radio"/> Kindergarten (Age 3)	<input type="radio"/> Pre-Reception (Age 4)	<input type="radio"/> Reception (Age 5)
<input type="radio"/> Primary Grade 1 (Age 6)	<input type="radio"/> Primary Grade 2 (Age 7)	<input type="radio"/> Primary Grade 3 (Age 8)	<input type="radio"/> Primary Grade 4 (Age 9)
<input type="radio"/> Primary Grade 5 (Age 10) <input type="radio"/> Primary Grade 6 (Age 11)			

School Hot Lunch: ☐ Yes ☐ No

Lunchtime Nap (Ages 2 & 3 only): ☐ Yes ☐ No

Parent/s / Guardian/s Personal Information:

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

Home Address:

Email Address:

Phone number (local & WhatsApp): _____

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

Address (If different from above):

Email Address: _____

Phone Number (local & WhatsApp): _____

Emergency contact name & number: _____

Mother's Signature & Father's Signature

*** Main Email to be used for all school communication:**



APPLICATION PROCESS:

Please tick (✓) the supporting documents you are submitting with this application.

Note: *Failure to provide all required documents means the application process may remain **incomplete***



Documents Description

- ☐ Completed Application Form (compulsory for registration)
- ☐ Child's Birth Certificate (compulsory for registration)
- ☐ Two Recent Passport-Sized Photographs (current photograph sent electronically is sufficient)
- ☐ Custody Paper/Legal Document (for single parents where only one parent can sign the application)
- ☐ Parent/Guardian Passport (copy) – for one or both parents where applicable.
- ☐ Previous School Reports (if requested)
- ☐ Medical or Educational Diagnosis Report (if applicable)
- ☐ Health Certificate (this is requested at the beginning of the school year for all students)
- ☐ Transfer Letter (for students coming from another school)
- ☐ Individual Education Plan (IEP) or Support Plan (if applicable)

Parent/Guardian Declaration:

I acknowledge that the above supporting documents must be submitted. I understand that missing documents will delay or invalidate the application.

Signature: _____

Date: ____ / ____ / ____



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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** (e.g. ADHD) or **health condition** (eg. allergies):

STUDENT HEALTH INFORMATION:

Section 1: Diagnosis Details (if relevant)

- **Diagnosis Name:** _____
- **Date of Diagnosis:** ____ / ____ / ____
- **Diagnosing Professional (Name & Title):** _____
- **Facility/Clinic Name:** _____

Section 2: Medical/Support Needs (if relevant)

- Does your child have any **allergies**? ☐ Yes ☐ No
 - If yes, specify details: _____

 - What must be done if an allergic reaction occurs? _____

- Does the child require essential **medication** during school hours? ☐ Yes ☐ No
 - If yes, please complete and submit our additional medicine permission slip*
- Does the child require special accommodations or support at school? ☐ Yes ☐ No
 - If yes, please provide details: _____

Section 3: Attachments

- ☐ Copy of diagnosis letter/report (if relevant)
- ☐ Medication plan / IEP or support plan (if applicable)

Section 4: Consent

I, the undersigned parent/guardian, confirm that the above information is accurate and consent to the school using this information to provide appropriate care and accommodations.

Pediatrician's name & number: _____

Parents/Guardians Signatures: _____



Financial Obligations:

We, The Parent(s)/Guardian(s), hereby acknowledge and agree to pay all applicable school fees including tuition, registration, and any other charges as stipulated by the School in its annual fee schedule as posted on the school website. Payment shall be made in full by the due dates communicated by the School, whether on a monthly, termly or annual basis. Failure to make timely payments may result in the suspension of the student's enrolment or withholding of academic records. The Parent(s)/Guardian(s) accept full financial responsibility and agree that this obligation remains in force regardless of any changes in the student's enrolment status.

By signing this registration form, we confirm that we have read the School Handbook and we confirm that our child will be attending the full school year as outlined in the School Handbook: Kindergarten & Pre-School end in July / Primary School ends in June. Even if our child is absent for any period of time, we confirm that we will still pay the required tuition fees. We confirm that we understand that our child's registration is complete only upon paying the required **annual registration fee** and providing the **required supporting documents**. We confirm that we understand that registration fees and tuition fees are **non-refundable** once paid.

Full name of mother/primary guardian & signature:

Full name of father/secondary guardian & signature:

Date of signature:



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PHOTOGRAPHS/VIDEO PERMISSION FORM

I _____ give my permission to Golden Oak Private School to take
photos/videos of my child _____ and to post those
photos/videos on their school website, social media, or for marketing purposes.

Full name of parent:

Signature of parent:

Date Signed:
