



GOLDEN OAK
PRIVATE SCHOOL

STUDENT REGISTRATION FORM 2025-2026

Student Name(s): _____ Surname: _____

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

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

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) Primary Grade 3 (Age 8)

School Hot Lunch: Yes No

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

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:



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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):

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 **registration fee** 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:

Date of signature:



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

Full name of parent:

Signature of parent:

Date Signed:
