



Application for Enrolment

Lodgement Date: _____ Level of Entry: _____ Year of Entry: _____

Student Details

First Name: _____ Last Name: _____

Date of Birth: _____ Gender: Male/Female Language Spoken at Home: _____

Address: _____ Suburb: _____ Postcode: _____

Nationality: _____

(if applicable) VISA status: _____ Date of Arrival: _____ Aboriginal / Torres Strait Islander

Current School: _____ State: _____ Level: _____

Victorian Student Number (VSN): _____

Medicare Number: _____ Ambulance Cover Number: _____

Health Cover Provider: _____ Health Cover Number: _____

Health Care Card Number: _____ Health Care Card Expiry: _____

Father's Details

First Name: _____ Last Name: _____

Address: _____ Suburb: _____ Postcode: _____

Nationality: _____ First Language: _____

(if applicable) VISA status: _____ Date of Arrival: _____ Religion: _____

Contact Number: (H) _____ (W) _____ (M) _____

Email: _____

Occupation: _____

Mother's Details

First Name: _____ Last Name: _____

Address: _____ Suburb: _____ Postcode: _____

Nationality: _____ First Language: _____

(if applicable) VISA status: _____ Date of Arrival: _____ Religion: _____

Contact Number: (H) _____ (W) _____ (M) _____

Email: _____

Occupation: _____

Kindergarten Year Level (please tick)

☐ 3 Years old Kinder (Thurs. & Fri.) 9am - 3pm

☐ 4 Years old kinder (Mon. Tues. Wed.) 9am - 3pm

Lighthouse Christian College
927 Springvale Road
Keysborough, VIC 3173
T (03) 8796 7373 F (03) 8796 7374
school.office@lighthouse.vic.edu.au
www.lighthouse.vic.edu.au

Emergency Contacts

1. First Name: _____ Last Name: _____

Relationship to student: _____ (H) _____ (M) _____

2. First Name: _____ Last Name: _____

Relationship to student: _____ (H) _____ (M) _____

Child Collection

No child is released to anyone other than those nominated on this enrolment form. In the event that the child is not collected from the school, the nominated person on the list will be contacted.

1. First Name: _____ Last Name: _____

Address: _____ Suburb: _____ Postcode: _____

Relationship to student: _____ (H) _____ (M) _____

2. First Name: _____ Last Name: _____

Address: _____ Suburb: _____ Postcode: _____

Relationship to student: _____ (H) _____ (M) _____

Student's Background

Please answer the following questions as accurately as possible. (If Yes, please specify)

Has your child attended another Day Care or Kindergarten? (Yes/No) _____

Does your child have any fears? (eg Dogs, dark areas) (Yes/No) _____

Does your child have special needs that may affect schooling?
(eg Intellectual, physical, emotional, language) (Yes/No) _____

Does your child have difficulty in communicating? (Yes/No) _____

Does your child receive additional support?
(eg Tutoring, psychologist, physiotherapy, speech pathologist, access assistance) (Yes/No) _____

Specify services involved (eg Yoralla) Type & amount of support (Provide copy of report to Kindergarten)

Is there other information we should be informed about?

Medical Information

Does the student suffer from any of the following issues? (If yes, please specify)

Allergies to Bites, Stings, Food, Medication, Ointment (Yes/No) _____

Asthma (Yes/No) _____

Anaphylaxis (Yes/No) _____

Diabetes / Hypoglycaemia (Yes/No) _____

Hearing / Speech or Visual Problems (Yes/No) _____

Other: _____

(All Medications required by the student must be given to the College by the parent/guardian in case of an emergency)

Conditions of Enrolment

1. Parents and students must at all times:

• Positively support the ELC’s ethos, aims, ethical values and Christian beliefs.

• Comply with the ELC’s rules, practices and policies as developed or amended from time to time.

2. Students must at all times:

• Be in good behaviour as to be a credit to the good name and reputation of the ELC.

• Be in proper ELC uniform as directed by the College.

• Be punctual for school and other ELC activities.

3. Parents and students must follow the Early Learning Centre “Handbook”.

4. Unless due to health issues or exceptional circumstances, or prior approval given to Principal or teachers, it is compulsory for students to:

• Attend classes.

• Attend ELC programs such as excursions and incursions.

• Participate in the ELC’s Perceptual Motor Program.

5. Parents authorise the College:

• To provide medical treatment to student when circumstances deem necessary.

• To call an ambulance if needed.

• To apply broad spectrum sunscreen purchased by the Parents.

• To check for head lice.

6. Parents acknowledge the right of the ELC to discipline students including cancelling a student’s enrolment, where, at the ELC’s discretion, it is appropriate to do so.

7. Parents acknowledge the right of the ELC to photograph students for school publications, website and various school promotions.

8. The parents/guardian signing this application to enrol the student is/are liable for fees and charges incurred in respect of that student, including debt collecting agency fees and solicitor costs should the account need to be placed in the hands of a debt collection agency. All fees are payable in advance on the first day of each term or as per communicated payment schedule.

In the case of hardship, alternative arrangements may be discussed with the Business Office.

• A current or new student’s admission for a new term may be refused if fees and charges are unpaid.

• Fees are subject to change by the ELC’s Council. Necessary notice and time will be given prior to fee increase.

• A ten weeks notice of withdrawal of student must be communicated to the ELC in writing.

• Failure to do so will render parents/guardian liable for one term of tuition fees.

Declaration

I/We recognise that the Lighthouse Early Learning Centre is seeking to be a place of excellence in education standards and Christian education and agree to support this in the education of my children.

I/We hereby certify that to the best of my/our knowledge, the information provided on this application is true and correct.

As parents/guardian, I/We agree to bind in particular by the above mentioned conditions of enrolment.

Signature (Father/Guardian)

Date

Signature (Mother/Guardian)

Date

First and last name

First and last name

The logo for Lighthouse Early Learning Centre features the word "Lighthouse" in a large, colorful, bubbly font where each letter is a different color (red, yellow, green, blue, red, yellow, green). Below it, the words "EARLY LEARNING CENTRE" are written in a smaller, black, sans-serif, all-caps font.

Application for Enrolment