

BHAKTIVEDANTA SWAMI GURUKULA Hare Krishna School

Founder-acarya His Divine Grace A. C. Bhaktivedanta Swami Prabhupada

ABN: 49 186 992 589 — Web: www.krishnaschool.org

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Phone: (02) 6672 3788 — E-mail: admin@krishnaschool.nsw.edu.au

Kindergarten 2018 - Orientation Course Application For ENROLLING students only

Student Details

Surname:	First Names:				
Spiritual Name:	Male/Female:				
Date of Birth:	Country of Citizenship:				
Home address of student:					
Health matters school should be awar					
Is your child required to take any med	lication? If so please provide details:				
Other special needs or abilities that th					
Family Information Father	Mother				
Surname:	Surname:				
First Names:	First Names:				
Spiritual Name:	Spiritual Name:				
Address:	Address:				
Phone:	Phone:				
email·	email:				

			(in case pa							
Na	me:	to atual	ent:			Mobile: _				
Ke	riationship	to stude	ent:							
Is	(For person No	ons of bot original.	ooriginal o	and Torres S	Strait Island	der origin, m		'Yes' boxes.)		
In			pecify							
Do	speak a	langua	their mot ge other th anguage, indi	an Englisl	h <i>at hom</i>	e?	en.)	mother		father
	No, Yes,	Englis Other	sh only - please sp	ecify	<u> </u>]]
				Stat	ement	of Supp	ort			
1.	I give permission for my child to take part in all school activities and understand that the teacher and school staff will be responsible for reasonable care and protection.									
2.	by His Div	ine Grace	e A. C. Bhakt	tivedanta Swa	ami Prabhu	ıpada, Found	ler-acarya	y of Krsna Cons for the Internal reas of instructi	tional Soc	
3.	I pledge to support the school in its efforts to maintain a positive and cooperative atmosphere in the school. I also agree to help the school staff in any behaviour management programs that may be required for my child. In this regard I understand that the school does not permit the use of corporal punishment.									
4.		that my						s of the school. nd implementat		
То	be signed	by botl	h parents u	nless a cou	rt docum	ent is prov	ided in	relation to sir	ngle cus	tody.
Father				Moth	ner					
Signed:				Signe	d:					
Date:			Date:							
] Fami	ly Cour	ed a copy of t Orders are as required	e in place v	with regai			ort y child. I hav	e attach	ed a copy
	or un	, Oruci	as required	by the sen	1001.					