



St Columba's School Bayswater

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Faith *Wisdom* *Peace* Grow in Faith Seek Wisdom Live in Peace

Enrolment Form Variation Authority

This form grants authority for a variation to the existing Enrolment Form(s) for the current or prospective students listed below, and alter the billing arrangements for the annual Tuition Fee, Building Levy, P&F Levy and other fees and charges relating to the family statement.

Please note: This form must be either signed by both parties listed on the current Enrolment Form as being responsible (joint and several) for the payment of all fees and charges; or separate forms received from both parties listed. Please refer to St Columba's School Fees Schedule and Policy for details on payment options and standard terms and conditions relating to school fees.

Please contact the Finance Officer for any questions regarding a variation to the existing Enrolment form on 9208 2700 or peta.santella@cewa.edu.au.

Amended Details of Parent/Guardian 1		
Family Name	First Name	Title
Address		Phone (H)
Address	Postcode	Phone (W)
Postal Address (If different from above)		
Email	Mobile	
Amended Details of Parent/Guardian 2/Alternate Family		
Family Name	First Name	Title
Address		Phone (H)
Address	Postcode	Phone (W)
Postal Address (If different from above)		
Email	Mobile	
Details of Student(s) attending St Columba's School		
Family Name	First Name	Year
Family Name	First Name	Year
Family Name	First Name	Year

Changes to Custody / Access Restriction Details

Child/Children now resides with:	Please circle:		Do amended Custody or Access Restrictions now apply? YES <input type="checkbox"/> <i>Please attach all relevant documentation</i>
Mother & Father	YES <input type="checkbox"/>	Permanent / Shared / Never	
Mother Only	YES <input type="checkbox"/>	Permanent / Shared / Never	
Father Only	YES <input type="checkbox"/>	Permanent / Shared / Never	
Other	YES <input type="checkbox"/>	Permanent / Shared / Never	
<i>Please detail:</i>			

Details of Split Billing Special Fee Arrangement Request - please tick appropriate box

Equal Split (50:50) <input type="checkbox"/>	Other: _____	Effective Date: _____
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Office Use ONLY:			
Date Received:	DF Key	ALT DF	Date Reply Sent:
Principal's Authorization:		Date:	

DECLARATION: ENROLMENT FORM VARIATION

I/We give St Columba's School authority to vary the existing Enrolment Form and implement amended billing arrangement for the students listed above, to cover all tuition fee, levies and other charges included on the family fee statement. This authority approves the division of the family fee account into two separate accounts in the names of the parents/guardians and in the ratio listed above, for the duration of our student's enrolment at St Columba's School.

By signing this authority I/We acknowledge that I/We have read and understand the school fees and charges. I/We agree to the payment of fees and charges, including late fees and recovery charges in the event of late payment or account default as per the school fees policy.

Parent/Guardian Declaration

I/We declare that I/We have the authority to request a variation to the Enrolment form and /or change to the billing arrangement as detailed above, and the information provided is accurate and true in every particular.

_____	_____	_____
Parent / Guardian 1 Signature	Date	Parent / Guardian 1 Full Name
_____	_____	_____
Parent / Guardian 2 Signature	Date	Parent / Guardian 2 Full Name

