

Takapuna Normal Intermediate School



STATUTORY DECLARATION

I,(name)

of.....(address)

1. Give authority to the Principal to act on my behalf in any medical emergency.
2. Give permission for my child to attend all approved educational visits and trips.
3. Agree to abide by all Board of Trustees Policies.
4. Have read, understood and agree to the conditions of enrolment as stated in the prospectus, and acknowledge that I have received a copy of the conditions of enrolment.
5. I acknowledge and authorize Takapuna Normal Intermediate School to collect, store, use and disclose the information provided on this form for the purpose of enrolment, general administration of the school and general welfare of my child during the term of enrolment at Takapuna Normal Intermediate School, and I agree to update the information as necessary.
6. I certify that all information provided in the application is correct and complete, including medical information.
7. I agree to pay all tuition fees, in advance, as stated in the prospectus, understand and accept the refund policy of Takapuna Normal Intermediate School.
8. I understand that if I, as a parent, have selected a designated caregiver for my child (named above) that this person/persons fully understands and accepts these conditions, and we have read, understood and signed the accompanying indemnity form.
9. I understand that the completion of this application form does not guarantee a place for my child
10. I understand that Takapuna Normal Intermediate School is a signatory of the Code, have read, understood and accept it.

Signed :

Witness :

Date :

Date :

(The witness is any office authorized to take a statutory declaration, Justice of the Peace, Solicitor of the High Court of New Zealand, Court Registrar).