



## Priority 2 Out of Zone Ballot Pre-Enrolment

Second priority [2] must be given to applicants who are siblings of current students.

What year is this out of zone ballot enrolment for? \_\_\_\_\_

### Child's Details:

Surname \_\_\_\_\_

First Names \_\_\_\_\_

Date of Birth \_\_\_\_\_ Gender - Male / Female

*Please note students enrolling for the first time must produce proof of age*

Place in family \_\_\_ of \_\_\_ (e.g 1 of 3) School Year next year ( Y0, Y1, Y2, Y3, Y4, Y5, Y6, Y7 or Y8)

Name of school(s) previously attended \_\_\_\_\_

New Zealand Residency Yes / No (*Proof required – passport or birth certificate*)

Name(s) of siblings presently attending Seatoun School:

\_\_\_\_\_

Permanent Residential and Contact Address:

\_\_\_\_\_

### Parent /Guardian Details:

1. Surname \_\_\_\_\_ First Name(s) \_\_\_\_\_

Phone details: Hm. \_\_\_\_\_ Wk. \_\_\_\_\_ Cell \_\_\_\_\_

Email: \_\_\_\_\_

2. Surname \_\_\_\_\_ First Name(s) \_\_\_\_\_

Phone details: Hm. \_\_\_\_\_ Wk. \_\_\_\_\_ Cell \_\_\_\_\_

Email: \_\_\_\_\_

### Statutory Declaration:

The information I/ we have provided in this application is true and correct, by Virtue of the Oath and Declarations Act 1957.

Signature(s) of Parent/ Guardian: \_\_\_\_\_ Date of Application: \_\_\_\_\_