

Priority 5 Out of Zone Ballot Pre- Enrolment

Fifth priority [5] must be given to applicants who are either a child of an employee of the Board of Trustees of the school or a child of a member of the Board of Seatoun School.

What year is this out of zone ballot e	nrolment for?				
Child's Details:					
Surname		<u></u>			
First Names					
Date of Birth		Gender - Male / Female			
Please note students enrolling for the firs	t time must produce p	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 the Declarations Act 1957.	nis application is true	and correct, by Virtue of the Oath and			
Signature(s) of Parent/Guardian:		Date of Application:			