



Portuguese Community Schools of Sydney Inc.
Petersham / Marrickville Portuguese School
Wilkins Public School
31 Park Road Marrickville

Escola Portuguesa de Petersham / Marrickville
ABN: 50 040 168 354 IBNID: 216-699

Student Enrolment Form

Student first name

The student name on this form must be the same as the name enrolled and used at any Australian School.

Student last name

Year to start

**Name of Australian School
(current year)**

**Current year in Australian
School**

Date of Birth

Address

Gender

Mobile (if applicable)

Email (If applicable)

**Medical Conditions / Special
Needs / Learning or
Behavioural Difficulties**

**Anaphylaxis Conditions
eg. peanuts, insect sting etc**

Carries EpiPen

YES NO

Student's Doctors Name

Student's Doctors Number

In the event of illness or injury to my child while at school or an excursion, or travelling to or from school, I authorize the Principal or a Senior staff member if/where it is impossible to contact me, to consent to emergency medical treatment as is necessary by a qualified medical practitioner

Portuguese Language Proficiency	New Students Only
Speech	<input type="checkbox"/> None <input type="checkbox"/> Basic <input type="checkbox"/> Intermediate <input type="checkbox"/> Advanced
Reading	<input type="checkbox"/> None <input type="checkbox"/> Basic <input type="checkbox"/> Intermediate <input type="checkbox"/> Advanced
Understanding	<input type="checkbox"/> None <input type="checkbox"/> Basic <input type="checkbox"/> Intermediate <input type="checkbox"/> Advanced
Writing	<input type="checkbox"/> None <input type="checkbox"/> Basic <input type="checkbox"/> Intermediate <input type="checkbox"/> Advanced

Publication Media Consent

YES NO

Consent is given to the student named on this form to authorize PMPS to take and use photographs, video or sound recordings and any reproductions of adaptations of the student's likeness, either in full or part, in conjunction with any wording or drawings, in any publication, production purposes in print, digital and social media of PMPS. This material will not be provided to any third party, other than as set out in this form.

Contact Information

Parent (1)	
Mobile	
Email	
Emergency Contact (other than parent)	
Parent (1) Signature	
Parent (2)	
Mobile	
Email	
Emergency Contact (other than parent)	
Parent (2) Signature	