



GOODWOOD SCHOOL ENROLMENT BALLOT FOR 2021

PARENT/CAREGIVER NAME/S:

ADDRESS:.....

CONTACT PHONE:

E-MAIL ADDRESS:

NAME	DATE OF BIRTH	CURRENT YEAR LEVEL

I / we have filled out the necessary forms

I / we understand that if the number of out of zone applications exceed the number of places available, students will be selected by ballot.

I / we confirm that all the information given on the enrolment form is true and correct.

Signed

Date

Office Only:	Notes:
Accepted: Yes / No	
Contacted: Yes / No Date:	

