

OXLEY STATE SCHOOL Student Contact Details Update

Please complete the details below and return to the school Administration Office for records to be updated.

For finance and newsletter correspondence please add your current email.

CHILD/CHILDREN'S NAMES

| SURNAME | | GIVEN NAMES | | |
|---|-----------|-------------|---------------------------------------|-----------|
| 1. | | | | |
| 2. | | | | |
| 3. | | | | |
| 4. | | | | |
| 5. | | | | |
| PARENT/GUARDIAN/CARER DETAILS | | | | |
| 1 st Parent/Guardian/Carer | | | 2 nd Parent/Guardian/Carer | |
| Mr/Mrs/Ms/Miss | | | Mr/Mrs/Ms/Miss | |
| Surname: | | | Surname: | |
| Given Names: | | | Given Names: | |
| Address: | | | Address: | |
| Postcode: | | Postcode: | | |
| Home Phone: | | | Home Phone: | |
| Mobile Number: | | | Mobile Number: | |
| Work Phone: | | | Work Phone: | |
| Email:(This email will receive newsletter and finance correspondence) | | | Email: | |
| <u>BILLING DETAILS:</u> Parent/caregiver will receive invoices via email. If Fee Allocation is to be shared between parents, please contact the Office for further information. | | | | |
| EMERGENCY CONTACTS | | | | |
| (NOT PARENTS/GUARDIAN/CARERS LISTED ABOVE) | | | | |
| Please ensure that the emergency contact names you provide are people you feel are totally trustworthy to collect your child from school if you cannot be contacted. A friend, neighbour or relative may be your choice but <u>it is important you check that they are willing to be recorded on your child's records as an emergency contact</u> . | | | | |
| | Contact 1 | | Contact 2 | Contact 3 |
| Name | | | | |
| Relationship | | | | |
| Home Phone | | | | |
| Work Phone | | | | |
| Mobile Phone | | | | |
| | | | | |
| Parent Name: Signature: Date: | | | | |

Office use only: $\ \square$ Entered in Oneschool $\ \square$ Print new student card