



Erskine Park High School

Pride In Achievement

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To be returned to the Front Office

Note: all previous information will be deleted

CHILDREN'S NAMES:		Year:	PC Group
HOME:	Mailing Title:		
	Address:		
	Home Phone Number:		
	Email address:		
FATHER/GUARDIAN:	Name:		
	Address and home phone <i>if different from 'Home' above:</i> Will not automatically be included as an emergency		
	Work phone number:		
	Mobile phone number:		
	Occupation:		
MOTHER/GUARDIAN:	Name:		
	Address and home phone <i>if different from 'Home' above:</i> Will not automatically be included as an emergency		
	Work phone number:		
	Mobile phone number:		
	Occupation:		
EMERGENCY	Name:	1.	2.
<i>Other than parent/s living at the same address as the student</i>	Home phone number:		
	Mobile phone number:		
	Relationship to child:		
CHANGES TO MEDICAL DETAILS/ALLERGIES			
CHANGES TO GUARDIANSHIP:			
SIGNATURE OF PARENT/GUARDIAN:			

OFFICE USE ONLY:	Date entered:	Initials:
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