



ST MARY'S CATHOLIC PRIMARY SCHOOL

18 MARY STREET, BUNBURY, WA 6230

ENROLMENT CANCELLATION FORM

STUDENT NAME: _____ YEAR/CLASS: _____ DOB: _____

STUDENT NAME: _____ YEAR/CLASS: _____ DOB: _____

STUDENT NAME: _____ YEAR/CLASS: _____ DOB: _____

STUDENT NAME: _____ YEAR/CLASS: _____ DOB: _____

LAST DAY AT SCHOOL: _____

CAREGIVER ONE'S FORWARDING ADDRESS: _____

PHONE: _____ MOBILE: _____ OTHER: _____

CAREGIVER ONE'S EMAIL ADDRESS: _____

CAREGIVER TWO'S FORWARDING ADDRESS: _____

PHONE: _____ MOBILE: _____ OTHER: _____

CAREGIVER TWO'S EMAIL ADDRESS: _____

FORWARDING SCHOOL: _____

ANY OTHER INFORMATION: _____

FORM COMPLETED BY: _____ DATE: _____

PLEASE PRINT

SIGNATURE: _____

BANK DETAILS: **BSB:** _____ **ACCOUNT NUMBER:** _____

(Required Details)

PO BOX 247, BUNBURY, WA 6231 / T: 08 97267500 / F: 08 97913219

E: admin@stmarysbnby.wa.edu.au