



ENROLMENT FORM 2026

CHILD'S DETAILS (please use block letters)			
Surname		Given Names	
Date of Birth		Gender (please tick):	Male <input type="checkbox"/> Female <input type="checkbox"/>
School Attending		School Year	

Sacraments Received	Date Received	Name of Parish, and Place
Baptism		
Reconciliation		
Eucharist		

FAMILY INFORMATION AND CONTACT DETAILS (please use block letters)			
Full Name of <i>Father</i>		Religion	
Full Name of <i>Mother</i>		Religion	
Mother's Maiden Name			
Home Address		Postcode	
Home Phone		Mobile Phone	
Email address			

EMERGENCY CONTACT				
Name		Relationship		Mobile Phone

DUTY OF CARE	
If your child has any physical, medical or educational needs that we should be aware of, please provide details:	

ENROLMENT REQUIREMENTS	
<p>At the time of enrolment, please provide a copy of your child's Baptism, Reconciliation and Eucharist Certificates, if applicable.</p> <p>Enrolment fees per year are: 1st child \$160.00, 2nd child \$80.00, 3rd child \$40.00, 4th child \$0.00 (or per school term are 1st child \$40.00, 2nd child \$20.00, 3rd child \$10.00, 4th child \$0.00.) If you require any further information, please contact the Sacramental Coordinator on 9307 2776 or via email to sacramental.whitford@perthcatholic.org.au</p>	

PARENTAL CONSENT & COMMITMENT		
<p>"As a parent, I consent to my child participating in the PREP, and I understand that I can best support my child in this program by ensuring my child's regular attendance to classes and Mass. I understand that if the minimum class attendance is not achieved, my child may not be allowed to receive the sacrament(s). I also agree to fully support my child in the preparation of the Sacrament(s), and I will attend all Information Sessions and Commitment Ceremonies, as and when required. Please tick <input type="checkbox"/></p> <p>At PREP events, I also consent & understand that photo or video images may be taken of my child and may be used in parish publications only & must notify the Parish Office otherwise. I have read & affirm the PREP Duty of Care Statement." Please tick <input type="checkbox"/></p>		
<p>Parent's Name: _____ Signature: _____ Date: _____</p>		