



RECEIPT NO. \_\_\_\_\_  
 DATE RECEIPT \_\_\_\_\_  
 FAMKEY \_\_\_\_\_  
 SORTCODE \_\_\_\_\_

### A.I.A MELBOURNE CAMPUSES

### A.I.A SYDNEY CAMPUSES

Prep - Year 5     Year 6 - Year 10     KG - Year 6     Year 7 - Year 10  
 Year 11 - Year 12     Year 11 - Year 12

## Registration Form

### STUDENT DETAILS

Family Name \_\_\_\_\_  
 Given Name \_\_\_\_\_  
 To enter year level \_\_\_\_\_ in the year \_\_\_\_\_ Gender  Male  Female  
 Date of birth \_\_\_\_\_ Country of birth \_\_\_\_\_  
 Religion \_\_\_\_\_ Nationality \_\_\_\_\_  
 Present school / Kinder \_\_\_\_\_  
(INCLUDING OVERSEAS COUNTRIES)  
 Student lives with  Both parents or  Father only or  Mother only  Grandparents  
 Other please specify \_\_\_\_\_  
(PLEASE ATTACH ANY DOCUMENTATION OF COURT ORDERS/OR PARENTING PLANS)  
 Australian Citizen  Yes or  No    Permanent Resident of Australia  Yes or  No

STUDENT DETAILS

### FATHER/MALE GUARDIAN DETAILS

Full Name \_\_\_\_\_  
 Residential Address \_\_\_\_\_  
 \_\_\_\_\_ Post Code \_\_\_\_\_  
 Postal Address \_\_\_\_\_  
 Occupation \_\_\_\_\_ Country of Birth \_\_\_\_\_  
 Home Phone \_\_\_\_\_ Mobile \_\_\_\_\_  
 Work Phone \_\_\_\_\_ Email \_\_\_\_\_  
 Signature of Parent / Guardian \_\_\_\_\_ Date \_\_\_\_\_

FATHER / MALE GUARDIAN

### MOTHER/FEMALE GUARDIAN DETAILS

Full Name \_\_\_\_\_  
 Residential Address \_\_\_\_\_  
 \_\_\_\_\_ Post Code \_\_\_\_\_  
 Postal Address \_\_\_\_\_  
 Occupation \_\_\_\_\_ Country of Birth \_\_\_\_\_  
 Home Phone \_\_\_\_\_ Mobile \_\_\_\_\_  
 Work Phone \_\_\_\_\_ Email \_\_\_\_\_  
 Signature of Parent / Guardian \_\_\_\_\_ Date \_\_\_\_\_

MOTHER / FEMALE GUARDIAN

Completed form and attached Birth Certificate must be returned to the School Registrar.

OFFICE USE ONLY

COURT ORDERS | \_\_\_\_\_

DOB EVIDENCE | \_\_\_\_\_ IMMUNISATION | \_\_\_\_\_

EDUCATIONAL REPORT | \_\_\_\_\_ INTERVIEW | \_\_\_\_\_

MEDICAL REPORTS | \_\_\_\_\_ OFFER | \_\_\_\_\_

## Registration Form

### CURRENT SCHOOL CONTACT (AS PART OF THE ENROLMENT PROCESS THE STUDENTS CURRENT SCHOOL WILL BE CONTACTED)

School Name | \_\_\_\_\_ Contact | \_\_\_\_\_

Position | \_\_\_\_\_ Phone | \_\_\_\_\_

Postal Address | \_\_\_\_\_

CURRENT S.

### EMERGENCY CONTACT

Contact Name | \_\_\_\_\_ Mobile | \_\_\_\_\_

Relationship to Student | \_\_\_\_\_

EMERGENCY

### SIBLINGS AT AUSTRALIAN INTERNATIONAL ACADEMY

(PLEASE, FILL IN IF APPLICABLE. EVEN IF CURRENTLY AWAITING ADMISSION)

Names of other children at this Academy

Year Level

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

SIBLINGS @ AIA

### PAYMENT DETAILS

A one-off Registration Fee of \$110 is payable with the Registration form. This fee is non-refundable.

Methods of payment:

- Cash (in person)
- Cheque (Payable to Australian International Academy)
- Credit Card (in person, surcharge apply) (NOT APPLICABLE TO SYDNEY STRATHFIELD CAMPUS)

PAYMENT DETAILS

### ENROLMENT GUARANTEE BOND (EGB)

The EGB is an interest free deposit of \$1,000 per student that is paid prior to commencing at the Academy.

The EGB will be refunded on written request if /when;

- Student leaves the Academy.
- Student completes final school year.
- Student was asked to leave, the Academy. (NOT APPLICABLE TO SYDNEY STRATHFIELD CAMPUS)

EGB

### DECLARATION

We declare that all the information provided in this Registration form is true and correct as of the date of registration.

We request that the above child be registered for enrolment at the Australian International Academy. We understand that we will be informed if and when a place becomes available. We are aware that the Registration fee is non-refundable. We will also advise the Australian International Academy of any change of address or contact details we may have.

Signature of Parent / Guardian (Male) | \_\_\_\_\_ Date | \_\_\_\_\_

Signature of Parent / Guardian (Female) | \_\_\_\_\_ Date | \_\_\_\_\_

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