



Enrolment Acceptance Form

This completed form must be returned to our office by Friday, 30 May 2025

Future Student's Name:

Please select one option below:

☐ I/We ACCEPT the offer of placement to attend St Thomas the Apostle Primary School in 2026.

☐ I/We DECLINE the offer of placement to attend St Thomas the Apostle Primary School in 2026.

If declining, please indicate the reason:

For New Families Only

Please select your method of payment for the non-refundable enrolment deposit of \$100.00:

☐ I have enclosed \$100.00 cash (in person only).

☐ I have paid via EFT to St Thomas the Apostle Primary School:

BSB: 083 347 Account Number: 676 054 092

(Please use your family surname as the reference)

☐ I authorise St Thomas the Apostle Primary School to debit my credit/debit card for \$100.00.

This amount is non-refundable and will be deducted from your 2025 school year Fees and Levies.

Credit/Debit Card Details:

Name on Card: _____

Card Number: ____ / ____ / ____ / ____

Expiry Date: ____ / ____ CCV: ____

Parent/Guardian Signatures

Both parents/guardians must sign below

Name: _____ Signature: _____

Date: _____

Name: _____ Signature: _____

Date: _____