

# St Stephen's Primary School

## Family Particulars Update Form

(This form must be completed whenever family particulars change)

Date: \_\_\_\_\_

	Parent / Guardian (mother) Residing with child	Parent / Guardian (father) Residing with child	Parent Not residing with child
Title (eg Mr / Mrs)			
Surname			
Other Name/s			
Preferred Name			
Marital Status			
Relationship to child			
Home Address			Is correspondence required, including Newsletter? (yes / no)
Address for Correspondence			✉:
			💻:
Home Phone Number			
Mobile Phone Number			
Fax Number			
Daytime Contact Number			

Family Email Address: \_\_\_\_\_

### Emergency Contacts:

Name	Relationship to Child	Phone Number
1.		
2.		
3.		

### Health Services:

Family Doctor	Phone Number
Family Dentist	Phone Number

Do you give Media Consent? Yes \_\_\_\_\_ No \_\_\_\_\_

Do you give permission for your child to participate in local excursions away from school, which usually involve walking?  
(e.g. Beauraba Lodge, Swimming Pool, Bridgman Oval, Parish Oval, Church)

Yes \_\_\_\_\_ No \_\_\_\_\_

### Optional:

Are you a member of a Private Health Fund? Yes \_\_\_\_\_ No \_\_\_\_\_ Table: \_\_\_\_\_

Do you have a Health Care Card? Yes \_\_\_\_\_ No \_\_\_\_\_

Medicare Number \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

	Child 1	Child 2	Child 3	Child 4
<b>Name</b>				
<b>Date of Birth</b>				
<b>Previous Serious Illnesses</b>				
<b>Allergies or health alerts, which may require emergency attention at school</b>				
<b>Long term medications</b>				
<b>Date of last Tetanus injection</b>				
<b>Measles, Mumps, Rubella &amp; other Immunizations</b>				
<b>Recent Specialist Assessments</b>				
<b>Legal / Custody Orders / matters</b>				
<b>Other issues</b>				

Parent / Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Parent / Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

(If possible, we would appreciate it if both parents sign this form please)