



LANGFORD ISLAMIC COLLEGE
CONFIRMATION OF RE-ENROLMENT FOR 2019
 (for current students only)

FAMILY NAME: _____ NO OF CHILDREN: _____

NAMES OF CHILDREN	YEAR LEVELS IN 2019	MEDICAL CONDITIONS (if any)

To assist us with allocating seats for your child/children in 2019, the College needs your confirmation of your child/ren's enrolment in 2019. Accordingly, kindly select one of the following options:

A. **CONFIRMATION OF RE-ENROLMENT IN 2019:** I confirm that my child/children will be attending Langford Islamic College in 2019. I would like to request LIC to reserve seats for them. My child/children will return to school on Monday, 4th February 2019 or at a later date on _____ (please indicate the start date) due to _____ (please state a reason).

B. **NOT RETURNING IN 2019:** My child/children are not re-enrolling for 2019 due to the following reason:
 Moving overseas or interstate Moving to another suburb Not satisfied with the College
 Other reason, please state: _____

C. **UNSURE IF RETURNING IN 2019:** Please note that if you select this option, seats for your child/children are likely to be given to other students on the waiting list.

D. **COLLEGE BUS SERVICE REQUIRED IN 2019:** YES NO (please circle)

E. **PARENTS' CONTACT DETAILS (if different to details previously supplied):**

EMAIL ADDRESS: _____

MOBILE NUMBER (MOTHER): _____

MOBILE NUMBER (FATHER): _____

HOME NUMBER: _____

MOBILE NUMBER (EMERGENCY CONTACT): _____

HOME ADDRESS: _____

F. **PERMISSION FOR PUBLICATION OF PHOTOS:**

I **DO / DO NOT** (please circle) GIVE PERMISSION FOR MY CHILD'S/CHILDREN'S PHOTOS TO BE PUBLISHED ON THE SCHOOL WEBSITE, NEWSLETTERS & OTHER SCHOOL COMMUNICATION SOURCES.

PARENT'S NAME: _____

PARENT'S SIGNATURE: _____

DATE: _____

Jazaak-Allah for taking time to complete this form and for your continued support.