

**CHANGE OF CONTACT DETAILS**

*For change of caregiver please use reverse side of this form*

**Student Details:**

**Student Name:** \_\_\_\_\_ **Home Group:** \_\_\_\_\_

**Student Mobile Number:** \_\_\_\_\_ **Student Email address:** \_\_\_\_\_

**Parent Details:**

**New Mailing Title (name of parent/caregiver):** \_\_\_\_\_

**New Mailing Address:** \_\_\_\_\_

\_\_\_\_\_ **Postcode:** \_\_\_\_\_

**New Residential Address (unless as above):** \_\_\_\_\_

\_\_\_\_\_ **Postcode:** \_\_\_\_\_

**New Billing Address (unless as above):** \_\_\_\_\_

\_\_\_\_\_ **Postcode:** \_\_\_\_\_

**Parent 1 Details**

**Name:** \_\_\_\_\_

**Home Phone:** \_\_\_\_\_ **Mobile Phone:** \_\_\_\_\_

**Work Phone:** \_\_\_\_\_ **Email address:** \_\_\_\_\_

**Parent 2 Details**

**Name:** \_\_\_\_\_

**Home Phone:** \_\_\_\_\_ **Mobile Phone:** \_\_\_\_\_

**Work Phone:** \_\_\_\_\_ **Email address:** \_\_\_\_\_

**Emergency Contacts:**

**Name:** \_\_\_\_\_ **Relationship:** \_\_\_\_\_

**Home Phone:** \_\_\_\_\_ **Mobile Phone:** \_\_\_\_\_

**Work Phone:** \_\_\_\_\_ **Email address:** \_\_\_\_\_

\*\*\*\*\*

**Name:** \_\_\_\_\_ **Relationship:** \_\_\_\_\_

**Home Phone:** \_\_\_\_\_ **Mobile Phone:** \_\_\_\_\_

**Work Phone:** \_\_\_\_\_ **Email address:** \_\_\_\_\_

**Any other information:** \_\_\_\_\_

\_\_\_\_\_

**Parent 1/Caregiver Signature:** ..... **Date:** ...../...../.....

**Parent 2/Caregiver Signature:** ..... **Date:** ...../...../.....

<b>OFFICE USE ONLY:</b>		<b>Date received:</b>		<b>Received by:</b>		
<b>UPDATED:</b>	<b>EDSAS</b> <input type="checkbox"/>	<b>DAYMAP</b> <input type="checkbox"/>	<b>SMS GLOBAL</b> <input type="checkbox"/>	<b>FINANCE</b> <input type="checkbox"/>		

**CHANGE OF CUSTODY/CAREGIVER**

*If there is NO change of caregiver please use reverse side of this form*

<b><u>Student Details:</u></b>	
Student Name: _____	Home Group: _____
Student Mobile Number: _____	Student Email address: _____
<b><u>CURRENT Parent/Caregiver:</u></b>	
Name: _____	Relationship: _____
Mailing Address: _____	
_____	Postcode: _____
<b><u>NEW Parent/Caregiver:</u></b>	
Name: _____	Relationship: _____
Mailing Address: _____	
_____	Postcode: _____
Home Phone: _____	Mobile Phone: _____
Work Phone: _____	Email address: _____
Residential Address (unless as above): _____	
_____	Postcode: _____
Billing Address (unless as above): _____	
_____	Postcode: _____
Custody Order/Agreement: YES/NO – If yes, please provide the school with a copy of the most recent Custody Order	

Any other information: _____
_____
_____
_____
_____

**CURRENT Parent /Caregiver Signature:** ..... **Date:** ...../...../.....

**NEW Parent/Caregiver Signature:** ..... **Date:** ...../...../.....

<b>OFFICE USE ONLY:</b>	<b>Date received:</b>	<b>Received by:</b>		
<b>UPDATED:</b>	EDSAS <input type="checkbox"/>	DAYMAP <input type="checkbox"/>	SMS GLOBAL <input type="checkbox"/>	FINANCE <input type="checkbox"/>