



**Assisi**  
Catholic College

## ADDITIONAL INFORMATION PERMISSION FORM

In accordance with the Enrolment Application Procedures and the Brisbane Catholic Education Privacy Statement, I/We \_\_\_\_\_ (Parent / Guardian) hereby authorise and direct the Principal or school representative of Assisi Catholic College, Upper Coomera, to collect and record any relevant information (either orally or via documentary material) in relation to my child as follows:

Child's name: \_\_\_\_\_

Child's Date of Birth \_\_\_\_\_

Current School / Child Care Centre: \_\_\_\_\_

Contact Person: \_\_\_\_\_

Contact Phone Number: \_\_\_\_\_

I understand and acknowledge that the information will be shared and stored by Brisbane Catholic Education organisation strictly for the purpose of enrolment application and ongoing education provision.

Parent Signature(s): \_\_\_\_\_

Parent Address: \_\_\_\_\_

Parent Contact Number(s): \_\_\_\_\_

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