

“ARISTOTELIS” GREEK LANGUAGE EDUCATION
Student/s Enrolment Form *(Please see overleaf)*

STUDENT 1

SURNAME: _____

FIRST NAME/s: _____

DATE OF BIRTH*: ____/____/____

HOME ADDRESS*: _____

_____ P/code _____

HOME  : _____

FULL NAME OF MAINSTREAM SCHOOL*: _____

YEAR AT MAINSTREAM SCHOOL*: _____

STUDENT 2

SURNAME: _____

FIRST NAME/s: _____

DATE OF BIRTH*: ____/____/____

NAME OF MAINSTREAM SCHOOL*: _____

_____ YEAR _____

STUDENT 3

SURNAME: _____

FIRST NAME/s: _____

DATE OF BIRTH*: ____/____/____

NAME OF MAINSTREAM SCHOOL*: _____

_____ YEAR _____

Select your preferred LOCATION

Strathfield North P.S

☐

West Ryde (W. Ryde P.S)

☐

am pm
please circle

Manly (Balgowlah B H/S)

☐

Carlingford (Roselea P.S)

☐

PARENT/CAREGIVER DETAILS (mandatory)

FULL NAME*: _____

Home  : _____

Mobile*: _____

Email* : _____

EMERGENCY CONTACT DETAILS*

NAME 1: _____

Tel no _____

NAME 2: _____

Tel no _____

I have read, understood and agree to the contents of this application, the Terms & Conditions displayed overleaf and on the “Aristotelis” website www.aristotelis.nsw.edu.au and in the “Aristotelis” School’s Handbook & Study Guide.

* Mandatory fields

Parent/Caregiver signature

PAYMENT DETAILS *Select your method of payment please tick Credit Card payment attracts a 3% surcharge*

CHEQUE made out to Hellenic Centre for Language & Culture ☐

DIRECT DEBIT / Account Name Hellenic Centre ☐

ANZ Bank - BSB: 012 226

Account Number: 4976 51537

** Include your name for correct crediting

CASH ☐

Mastercard ☐ Visa ☐

Card Number

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Expiry Date:

Name on Card:

Full amount : \$ _____

OR

Quarterly Instalments of: \$ _____

Cardholder’s signature

MEDICAL CONSENT

It is the policy of the school to notify a parent, when a child is ill or needs medical attention. Occasionally we cannot contact parents and we may need to get immediate help for the child. Our procedure is to take the child to the nearest emergency service

1 You hereby give authorization to any member of the primary contact staff of the Greek Community Language School "Aristotelis" to

*seek urgent medical or dental treatment by a preferred doctor or dentist nominated by you, or other doctor or dentist,

*take the student to a public hospital,

*use an ambulance service, or

*take the assistance from some other person or body nominated by you as the parent or person responsible, for the student stated in this enrolment application, if the member is of the opinion that it is necessary to do so because the student has been injured, or is ill, whilst in attendance at the Community Greek Language School "Aristotelis".

2. You agree to pay for the ambulance service and any other expenses accrued in providing the student with emergency health care.

3. You understand that if any treatment is sought or obtained that the Greek Community Language School "Aristotelis" will use every reasonable means to ensure that you are notified as soon as possible.

4. You understand that none of the above affects the ability of a doctor or dentist to carry out emergency medical or dental treatment on my child without my consent.

Allergies _____

Special Health Needs _____

Other: _____

PHOTO CONSENT

I, the undersigned Parent/Caregiver, hereby **PROVIDE** my consent to Aristotelis Greek Language Education & the Hellenic Centre for Language & Culture Inc. to publicise my child/children's photographs on the school's websites and Handbook.

YOUR AUTHORISATION

You, the parent or guardian of the student being enrolled, have provided all the necessary information and have read, understood and agreed to the terms set out in the medical consent form and in the school fees policy.

Name (Print) _____

Parent/Guardian Signature _____

Date ____/____/____

TERMS & CONDITIONS SCHOOL FEES POLICY

Rationale

"Aristotelis" Greek language Education is an independent Greek Language Education provider under the auspices of the Hellenic Centre for Language & Culture of Australia Inc.

The School was established in 1993 with the purpose of providing a quality Greek language & culture education for students of all cultural and economic backgrounds.

The School is committed to ensuring each student achieves their full potential by employing professional staff and ensuring facilities and resources are of a standard that meet the expectations of the contemporary education industry.

In order to achieve these goals it is essential the School manage its resources in an efficient and effective manner. The future financial viability of "Aristotelis" Greek Language Education relies heavily on the acceptance of today's commercial realities and the need for all families to make a fair and just contribution to each student's education.

Recovery of fees will be conducted in an orderly, open, and fair manner. If payment does become an issue, all families will be provided with the opportunity of approaching the Principal, in complete confidence.

The Policy

Parents and Caregivers who enrol students at "Aristotelis" Greek Language Education are responsible for meeting all costs associated with the education of those students during the term of their enrolment.

Student enrolment implies attendance for the entire school year. Staff is engaged based on enrolment numbers at the commencement of each year.
Once enrolled, parents are liable for the full annual amount unless there are compelling reasons.
Student withdrawal at any time during the school year will attract a payment of the full balance owing at the time of withdrawal.

Fee Payment Process

Tuition fees are payable at the beginning of each Term. These annual charges are split equally over four terms of the school year. Accounts will be sent out every quarter. (For payment options see overleaf).

PLEASE NOTE:

Afternoon classes operate for a minimum period of two hours. School operates for 35 weeks minimum in accordance with the Community Languages Program-Department of Education policy. Kindergarten & Year 1 students may be picked up earlier but not before the first hour of instruction. Students **MUST** be collected from their classroom and the teacher is notified. Students are advised to bring their own snack and drink. Curriculum remains the same, for both Afternoon and Saturday classes.