

Enrolment Category Application Form

P.O. Box 37, Carina, Q. 4152 66 Broadway Street, Carina, Q. 4152 T: 07 3900 9100 E-mail: pcarina@bne.catholic.edu.au



Child's Name:				
Commencing Grade: in				in Year 20
Rea	son for Enrollir	ng:		
	•			Martin's School, preference will be accorded in order of the Category e to your application:
	Category 1. Th	ne child is a si	bling of a curren	nt student of St Martin's.
	Category 2. Th	e child is a b	aptised Catholic,	c, whose family worships at Our Lady of Graces' Church.
	Category 3. Th	e child is a b	aptised Catholic,	c, whose family worships at another Parish.
	Category 4. Th	e child is bar	otised, whose far	mily is practicing another faith tradition.
	Category 5. Th	e child is not	baptised and bo	oth parents support the philosophy of Catholic Education
				arina@bne.catholic.edu.au OR visit the school office.
				Administration fee and does not guarantee an interview. St will be notified if an interview can be offered.
				lment Application Fee:
1.	Online Paymen	t <u>Click Here</u>	BPOINT	Receipt Number:
2.	Visa Card	Ma	astercard	
	Name on card: _			Card No:
	Expiry Date:	/	\$	Signature:
3.	EFTPOS (visit the	e school office	e)	
FOR	OFFICE USE ONLY			

Date Received: _____ Name: _____ Year and Level: ____ Amount Paid: ____ Cat#: ____