

**MACEDONIAN COMMUNITY OF WESTERN AUSTRALIA INC**  
**MACEDONIAN COMMUNITY LANGUAGE SCHOOL**  
**ENROLMENT FORM 2016**  
Classes start Term One Week 1, 1<sup>st</sup> – 5th February 2016

**Student Details**

Family name:	Given name/s:	Date of Birth _ / _ / _	Gender: (M/F)
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Address:	Postcode:
Telephone Number:	
Email Address:	

**Parent/Guardian Details** (if applicable)

Family name:	Given name:
Relationship to student:	
Telephone Number: (H)	(W): (M):

**Class For Which Student Is Enrolling** (Please tick ✓)

Age Group	Day	Class Time	Location	
School Age (Years K to 12)	Wednesday	4.30pm to 6.00pm	Balcatta House 334 Albert Street, Balcatta	<input type="checkbox"/>
Other (17 years to Adult) Foundation Macedonian (For students who have no/little knowledge of the Macedonian language)	Tuesday	7.00pm to 8.30pm	Macedonian Community Centre 51 Albert Street, North Perth	<input type="checkbox"/>
Advanced Conversational Macedonian (Students enrolling in this course must have the ability to read and write Macedonian at a basic level)	Tuesday	7.00pm to 8.30pm	Macedonian Community Centre 51 Albert Street, North Perth	<input type="checkbox"/>

**Classes will not be held during school term holidays, on public holidays or during long weekends when a public holiday falls on a Saturday or a Monday.**

**Tuition Fees**

School Age Students attending Years Kindergarten to 12	\$150.00 (inc. textbook and other resources)
Other	\$375.00 (inc textbook (Makedonski Jazik by Christina E. Kramer and Liljana Mitkovska) and other resources)

**Emergency Contact Details**

	Name	Relationship	Telephone Contact
1			
2			

**Medical Details** (If aged under 18, must be completed by parent/guardian)

Does the child suffer from a medical condition or allergies?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
If yes, please specify _____		

**Permission to Publish Images of Students** (If aged under 18, must be completed by parent/guardian)

The Macedonian Community of Western Australia Inc would like to use written material, photographs and digital images of the above student and/or their work to promote the work of their Community Language School. These may be used in print, media and electronic publications, including the Community's website. (Please tick ✓)

I consent <input type="checkbox"/>	I do not consent <input type="checkbox"/>
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**Submitting Your Enrolment Form**

School Enrolment Forms may be submitted using the following options:

**1. By post**

Please post completed Enrolment Form and cheque to Macedonian Community of Western Australia Inc, PO Box 12, North Perth WA 6906 marked to the attention of Director, Macedonian Community Language School. Cheques should be made payable to *Macedonian Community of Western Australia Inc* and crossed *Not Negotiable*.

**2. Electronically** (to use this option you must pay by EFT)

Please complete the Enrolment Form and email to [language@macedoniawa.com.au](mailto:language@macedoniawa.com.au) and transfer the relevant tuition fee to:

Account Name:	Macedonian Community of Western Australia Inc
Bank:	Bendigo Bank
BSB:	633-000
Account Number:	154460760
Reference:	MCLS followed by the student's full name.

Please note: The correct fee must accompany the enrolment.

**Signature of Parent/Guardian** (if aged under 18)

Signature:	Name: (please print)	Date:
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