



General Information Form

Private and confidential

Child's Details

First name _____ Surname _____

Date of Birth _____ Gender: Male Female

Start Date / Term / Year _____

Contact information

Mother

First name and Surname _____

Telephone _____

Email address _____

Father

First name and Surname _____

Telephone _____

Email address _____

Your child's current school and school system:

Your child's current grade level:



Brook Hill International School

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If your child has a disability please specify below:
