



MERCY CATHOLIC COLLEGE

Change of Student/ Family Details

Date changes take effect: ____ / ____ / ____

Changes applicable to (please tick ✓): Student Father/Carer Mother/Carer

Student's Full Name: _____ Year: _____ Homeroom: _____

New Address: _____

_____ Postcode: _____

Old Address: _____

_____ Postcode: _____

Phone Number:

Father: (h) _____ Mother: (h) _____

(w) _____ (w) _____

(m) _____ (m) _____

Email:

Father: _____ Mother: _____

Fees: _____ (preferred email)

Correspondence: _____ (preferred email)

New/Amended Emergency Contact/s Information:

1. Name: _____ Relationship: _____ Phone: _____

2. Name: _____ Relationship: _____ Phone: _____

Remove Emergency Contact:

1. Name: _____ 2. Name: _____

Parents/s Carer Signature: _____ Date: _____

Office use only

Edumate Updated

Old travel returned

SAS updated

New travel pass applied for

MERCY CATHOLIC COLLEGE CHATSWOOD

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