



# MERCY CATHOLIC COLLEGE

CHATSWOOD

EST. 1890

## APPLICATION FOR ENROLMENT

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MERCY CATHOLIC COLLEGE CHATSWOOD  
101 Archer Street, Chatswood NSW 2067

Tel: (02) 9419 2890 Email: [mercy@dbb.catholic.edu.au](mailto:mercy@dbb.catholic.edu.au) Web: [www.mercychatswood.nsw.edu.au](http://www.mercychatswood.nsw.edu.au)

## CHECKLIST

The following documentation is required in support of this application:

- the student's birth certificate and / or passport and / or visa\*
- a recent passport sized photo of the student\*
- Baptismal certificate and other Sacramental certificates to date\*
- Parents' citizenship certificate and / or passport visa for parents' born overseas\*
- Parish Priest Reference Form
- Current school reports and NAPLAN results
- Any relevant medical and / or special needs assessments (where applicable)
- \$250.00 non refundable application fee per application.

\* Original documents will need to be produced during the enrolment process



# ENROLMENT FORM

DIOCESE OF BROKEN BAY SYSTEMIC SCHOOLS



**MERCY CATHOLIC COLLEGE**  
 101 Archer St Chatswood NSW 2067 Ph: 9419 2890  
 email: [mercy@dbb.catholic.edu.au](mailto:mercy@dbb.catholic.edu.au) website: [www.mercychatswood.nsw.edu.au](http://www.mercychatswood.nsw.edu.au)

Photo	<b>Office use only</b>
	Family code:
	Student ID number:

**Mail from school to be sent to**

Address (please circle) Mr & Mrs Mr Mrs Ms Dr Prof

Surname ..... Given Name .....

Address .....

..... Postcode.....

Contact tel. .... e-mail address .....

**Student Details**

Surname ..... Entry Year (eg 2018).....

Given name(s)..... Entry Level (eg Yr 7).....

Preferred given name ..... Date of Birth .....

Religion ..... Sex Male  Female

Address (if different from above mailing address) .....

.....

..... Postcode.....

Contact tel. .... e-mail address .....

**Sacramental Information**

Baptism Date ..... Parish .....

Confirmation Date ..... Parish .....

Reconciliation Date ..... Parish .....

Communion Date ..... Parish .....

Current Parish .....

**Student Details** (cont'd)

**Previous School**

Name .....

I/We give permission to the school to contact this previous school Yes  No

Nationality .....

In which country was the student born?

Australia  Other (please specify) .....

Is the student of Aboriginal or Torres Strait Islander origin?

No   
Aboriginal Yes  (for persons of both Aboriginal and Torres Strait  
Torres Strait Islander Yes  Islander origin, tick both Yes boxes)

**Residential Status**

Australian Citizen (Naturalisation Certificate or Australian Passport if country of birth is not Australia)

Permanent resident (Passport if country of birth is not Australia)

Temporary resident (Passport or Visa)

Foreign National without residential status (Passport and Visa)

Visa No ..... Passport No. .... Visa expiry date .....

Does the student or their mother/carer or their father/carer speak a language other than English at home? If more than one language, indicate the one that is spoken most often

	Student	Mother/carer	Father/carer
No - English only	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Yes	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

(If yes, specify language spoken most often) .....

**Medical Information**

Name of Doctor .....

Address .....

..... Postcode ..... Contact tel.. .....

Medicare No. .... Private Health Fund .....

Medical Condition(s) (Please list any medical condition(s) the student suffers from, eg asthma, diabetes and/or any prescribed medication taken by the student)

.....

.....

Allergies (Please list any known allergies the student has, eg allergy to nuts, penicillin, bee stings, etc. Include specific details)

.....

.....

Has the student been diagnosed as being at risk of anaphylaxis? Yes  No

If yes, does the student have an EpiPen? Yes  No

**Student Details** (cont'd)

Immunisation (Please indicate if the student has been immunised against the following:

	Tick appropriate box		Date of immunisation
Hepatitis B	Yes <input type="checkbox"/>	No <input type="checkbox"/>	.....
Diphtheria - Tetanus - Whooping cough	Yes <input type="checkbox"/>	No <input type="checkbox"/>	.....
Haemophilus Influenzae Type B (Hib)	Yes <input type="checkbox"/>	No <input type="checkbox"/>	.....
Polio	Yes <input type="checkbox"/>	No <input type="checkbox"/>	.....
Pneumococcal Disease	Yes <input type="checkbox"/>	No <input type="checkbox"/>	.....
Rotavirus	Yes <input type="checkbox"/>	No <input type="checkbox"/>	.....
Measles - Mumps - Rubella	Yes <input type="checkbox"/>	No <input type="checkbox"/>	.....
Influenza (Flu)	Yes <input type="checkbox"/>	No <input type="checkbox"/>	.....
Meningococcal C Disease	Yes <input type="checkbox"/>	No <input type="checkbox"/>	.....
HPV	Yes <input type="checkbox"/>	No <input type="checkbox"/>	.....
Chickenpox (Varicella)	Yes <input type="checkbox"/>	No <input type="checkbox"/>	.....

**Students with Special Needs**

Your application provides an opportunity to gather information that will support the learning needs of your daughter. Our school seeks to promote the spiritual, educational and social development of all our students. We work in partnership with families to collaboratively plan for students with additional needs.

**If the information provided is incomplete or misleading, any decision made as to enrolment may be revised.**

a) Has your daughter been assessed and diagnosed with a disability? No  Yes  *please complete the following information*

Physical disability Yes  No

Allergies  .....

Asthma  Diabetes  Epilepsy

Other  .....

Cognitive disability Yes  No

Intellectual disability  Language disorder  Learning disorder

Other  .....

Social, communication, emotional challenges Yes  No

Autism

Behavioural concerns for self or others

Mental health concerns eg anxiety, separation disorder, elective mutism, etc

Concerns regarding attention eg ADD/ADHD

Other  .....

Sensory impairment Yes  No

Hearing  Vision

Other  .....

**Student Details** (cont'd)

**Special Needs** (cont'd)

b) What supports are currently in place to support your daughter to access and participate in their current educational setting?

Adjustments to

- Learning
- Supervision
- Support for health care procedures
- Specialist furniture and/or equipment
- Mobility supports, equipment and/or personnel
- Communication supports (braille, signing, assistive technology, communication devices)
- Disability provisions for assessments
- Other (please specify)

.....  
.....

c) Is your daughter receiving specialist therapy? Yes  No

Occupational therapy  Speech Pathology

Other  (please specify) .....

Please provide copies of all reports from a doctor or health professional relating to your daughter's special needs.

The school will contact you to begin the consultation process. Ongoing collaboration will assist the school to better understand your daughter's needs and to commence planning for required (reasonable) adjustments. If there are any changes to your daughter's special needs you must promptly notify the school.

**Health and Safety**

To your knowledge, is there anything in your daughter's history or circumstances (including medical history) which might pose a risk of any type to him/her, other students and/or staff at this school? No  Yes  (provide details)

.....  
.....

Please provide names and contact details of health professionals or other relevant agencies that have knowledge of these issues

.....  
.....

Does your daughter have any history of violent behaviours: Yes  No

Does your daughter have any history of behavioural problems including verbal bullying? Yes  No

Has your daughter ever been suspended or expelled from any previous school? Yes  No

- If yes, was this for
- Actual violence to any person
  - Possession of a weapon or any item used to cause injury
  - Intimidation, bullying or harassment of students/staff
  - Threats of violence
  - Illegal drugs
  - Other (please specify)

Please tick any applicable box

.....  
.....

**Student Details** *(cont'd)*

**Health and Safety** *(cont'd)*

**Consent** I/We will provide written consent to the school on request to contact health professionals or other relevant agencies Yes  No

**Specialised Teaching Consent**

There are a number of specialised teachers that your daughter may decide to access at the College. These may include the Careers Advisor, the College Counsellor, the Learning Support Co-ordinator and the Director of Curriculum.

- NO, I do not give permission for my daughter to access specialised teaching services
- YES, I give permission for my daughter to access specialised teaching services

I understand that these permissions are valid for the duration of my daughter's enrolment at Mercy Catholic College. I understand that I can make amendments in writing to this authorisation.

**Court Orders / Parenting Agreements** *(if applicable)*

Are there any current court orders or parenting agreements relating to the student? Yes  No

*If yes, copies of these court orders (eg. AVOs, Family Court/Federal Magistrate Court orders) or other relevant documents must be provided.*

Is there any other parenting information you wish the school to be aware of?

.....  
.....  
.....

**Family Details**

**Mother / Carer** *(please circle)* Mrs Ms Dr Prof

Surname ..... First Name.....

Address .....

..... Postcode.....

Contact Nos Home..... Work .....

Mobile ..... email address.....

Occupation .....

**Government requirement:** What is the occupation group? *(select from list on page 7)*

Religion ..... Nationality.....

Country of birth Australia  Other *(please specify)* .....

What is the **highest** year of primary or secondary school completed?  
*(Persons who have never attended school, tick 'Year 9 or equivalent or below' box)*

- Year 9 or equivalent or below  Year 10 or equivalent
- Year 11 or equivalent  Year 12 or equivalent

## Family Details *(cont'd)*

What is the level of the **highest** qualification the mother/carer has completed?

Non-school qualification  Certificate I-IV *(including Trade Certificate)*   
 Advanced Diploma/Diploma  Bachelor Degree or above

**Father / Carer** *(please circle)* Mr Dr Prof

Surname ..... First Name.....

Address .....  
 ..... Postcode.....

Contact Nos Home..... Work .....  
 Mobile ..... e-mail address .....

Occupation .....

What is the occupation group of the father/carer? *(select from list on page 7)*

Religion ..... Nationality.....

Country of birth Australia  Other *(please specify)* .....

What is the **highest** year of primary or secondary school completed?  
*(Persons who have never attended school, tick 'Year 9 or equivalent or below' box)*

Year 9 or equivalent or below  Year 10 or equivalent   
 Year 11 or equivalent  Year 12 or equivalent

What is the level of the **highest** qualification the father/carer has completed?

Non-school qualification  Certificate I-IV *(including Trade Certificate)*   
 Diploma / Advanced Diploma  Bachelor Degree or above

## Emergency Contact(s) - in addition to parent(s) / carer (s)

	Contact 1	Contact 2
Name(s)	.....	.....
Relationship to student	.....	.....
Contact tel(s)	.....	.....

## Sibling Details

List all children in your family attending school or pre-school *(from oldest to youngest including applicant)*

Name	School/Pre-school	Year/Grade <i>(Current calendar year)</i>	Date of Birth <i>(Pre-school only)</i>



## List of parental Occupation Groups

<b>Group 1</b>	Senior management in large business organisation, government administration and defence and qualified professionals
	<ul style="list-style-type: none"> <li>• <b>Senior executive, manager, department head in industry, commerce, media or other large organisation</b></li> <li>• <b>Public service manager</b> (section head or above), regional director, health/education/police/fire services administrator</li> <li>• <b>Other administrator</b> (school principal, faculty head/dean, library/museum/gallery director, research facility director)</li> <li>• <b>Defence Forces</b> Commissioned Officer</li> <li>• <b>Professionals</b> generally have degree or higher qualifications and experience in applying this knowledge to design, develop or operate complex systems; identify, treat and advise on problems; teach others</li> <li>• <b>Health, Education, Law, Social Welfare, Engineering, Science, Computing</b> professionals</li> <li>• <b>Business</b> (management consultant, business analyst, accountant, auditor, policy analyst, actuary, valuer)</li> <li>• <b>Air/Sea transport</b> (aircraft/ship's captain, officer, pilot, flight officer, flying instructor, air traffic controller)</li> </ul>
<b>Group 2</b>	Other business managers, arts/media/sportspersons and associate professionals
	<ul style="list-style-type: none"> <li>• <b>Owner / Manager</b> of farm, construction, import/export wholesale, manufacturing, transport, real estate business</li> <li>• <b>Specialist manager</b> (finance/engineering/production/personnel/industrial relations/sales/ marketing)</li> <li>• <b>Financial services manager</b> (bank branch manager, finance/investment/insurance broker, credit/loans officer)</li> <li>• <b>Retail sales/services manager</b> (shop, petrol station, restaurant, club, hotel/motel, cinema, theatre, agency)</li> <li>• <b>Arts / media / sports</b> (musician, actor, dancer, painter, potter, sculptor, journalist, author, media presenter, photographer, designer, illustrator, proof reader, sportsperson, coach, trainer, sports official)</li> <li>• <b>Associate professionals</b> generally have diploma/technical qualifications and support managers and professionals</li> <li>• <b>Health, Education, Law, Social Welfare, Engineering, Science, Computing</b> technician/associate professional</li> <li>• <b>Business / administration</b> (recruitment/employment/industrial relations/training officer, marketing/advertising specialist, market research analyst, technical sales representative, retail buyer, office/project manager)</li> <li>• <b>Defence Forces</b> senior Non-Commissioned Officer (NCO)</li> </ul>
<b>Group 3</b>	Tradespeople, clerks and skilled office, sales and service staff
	<ul style="list-style-type: none"> <li>• <b>Tradespeople</b> (generally have completed a 4-year Trade Certificate, usually by apprenticeship. All tradespeople are included in this group)</li> <li>• <b>Clerks</b> (bookkeeper, bank, PO clerk, statistical/actuarial clerk, accounting/claims/audit clerk, payroll clerk, recording/registry/ filing clerk, betting clerk, stores/inventory clerk, freight/transport/shipping clerk, bond clerk, customs agent, customer services clerk, admissions clerk)</li> <li>• <b>Skilled office, sales and service staff</b> <ul style="list-style-type: none"> <li>○ <b>Office</b> (secretary, personal assistant, desktop publishing operator, switchboard operator)</li> <li>○ <b>Sales</b> (company sales representative, auctioneer, insurance agent/assessor/loss adjuster, market researcher)</li> <li>○ <b>Service</b> (aged/disabled/refugee/child care worker, nanny, meter reader, parking inspector, postal worker, courier, travel agent, tour guide, flight attendant, fitness instructor, casino dealer/supervisor)</li> </ul> </li> </ul>
<b>Group 4</b>	Machine operators, hospitality staff, assistants, labourers and related workers
	<ul style="list-style-type: none"> <li>• <b>Drivers, mobile plant, production, processing machinery and other machinery operators</b></li> <li>• <b>Hospitality staff</b> (hotel service supervisor, receptionist, waiter, bar attendant, kitchen hand, porter, housekeeper)</li> <li>• <b>Office assistants, sales assistants and other assistants</b> <ul style="list-style-type: none"> <li>○ <b>Office</b> (typist, word processing/data entry/business machine operator, receptionist, office assistant)</li> <li>○ <b>Sales</b> (sales assistant, motor vehicle/caravan/parts salesperson, checkout operator, cashier, bus/train conductor, ticket seller, service station attendant, car rental desk staff, street vendor, telemarketer, shelf stacker)</li> <li>○ <b>Assistant/aide</b> (trades assistant, school/teacher's aide, dental assistant, veterinary nurse, nursing assistant, museum/gallery attendant, usher, home helper, salon assistant, animal attendant)</li> </ul> </li> <li>• <b>Labourers and related workers</b></li> <li>• <b>Defence forces</b> ranks below senior NCO not included above.</li> <li>• <b>Agriculture, horticulture, forestry, fishing, mining worker</b> (farm overseer, shearer, wool/hide classer, farm hand, horse trainer, nurseryperson, greenkeeper, gardener, tree surgeon, forestry/logging worker, miner, seafarer/ fishing hand)</li> <li>• <b>Other worker</b> (labourer, factory hand, storeperson, guard, cleaner, caretaker, laundry worker, trolley collector, car park attendant, crossing supervisor)</li> </ul>

**Agreement - please tick appropriate boxes**

- 1 I/We agree to support school policies in relation to program of studies, sport, pastoral care, school uniform, discipline and the general operation of the school
- 2 I/We have included copies of the following documents with this application for enrolment:
- the student's birth certificate and / or passport and /or visa\*
  - a recent passport sized photo of the student\*
  - Baptismal certificate and other Sacramental certificates to date\*
  - Parents' citizenship certificate and / or passport visa for parents' born overseas\*
  - Parish Priest Reference Form
  - Current school reports and NAPLAN results
  - Any relevant medical and / or special needs assessments (where applicable)
  - \$250.00 non refundable application fee per application.

**\* Original documents will need to be produced during the enrolment process**

- 3 If this enrolment application is successful, I/We agree to honour the financial commitments required by the school as per the Schedule of Fees and Charges
- 4 I/We understand that if this application is successful, the information that I/we have provided (eg of address, court orders, special needs etc) must be kept up to date throughout the period of enrolment.
- 5 If this enrolment is accepted, I/we agree to support our daughter's participation in the religious life of the school (eg school liturgies, retreat programs)
- 6 If, in time of emergencies, accidents or serious illness, I/we cannot be contacted I/we give permission for the principal or their representative, to seek medical attention for my/our daughter as required. This may include transportation to the nearest hospital, medical centre or doctor by ambulance or private vehicle Yes  No

I/We have read all the information in the enrolment package and understand the policies that we will need to abide by should this enrolment application be successful.

I/We have read the Standard Collection Notice about the collection and management of the personal information contained in this form.

I/We understand that if any misleading information has been provided or any omission of significant, relevant information made in this application for enrolment, acceptance will not be granted, or if discovered after acceptance, the enrolment may be withdrawn.

**Signatures**

..... (Mother/Carer) ..... (Date)

..... (Father/Carer) ..... (Date)

**Note** Acceptance of this *Application for Enrolment* is subject to the approval of the school's Enrolment Committee. Acceptance to this school does not constitute acceptance into any other catholic primary or secondary school.

1. The school and the Diocese both independently and through its schools collect personal information, including sensitive information about students and parents or guardians before and during the course of a student's enrolment at the school. This may be in writing or in the course of conversations. The primary purpose of collecting this information is to enable the school to provide schooling to students enrolled at the school, exercise its duty of care, and perform necessary associated administrative activities, which will enable students to take part in all the activities of the school.
2. Some of the information we collect is to satisfy the school's legal obligations, particularly to enable the school to discharge its duty of care.
3. Laws governing or relating to the operation of schools require certain information to be collected and disclosed. These include education, public health and child protection laws.
4. Health information about students is sensitive information within the terms of the Australian Privacy Principles under the Privacy Act. We may ask you to provide medical reports about your child from time to time.
5. If we do not obtain the information referred to above, we may not be able to enrol or continue the enrolment of your son/daughter.
6. The school may disclose personal and sensitive information for educational, administrative and support purposes. This may include:
  - Other schools and teachers at those schools
  - government departments and agencies
  - the Catholic Schools Office
  - the Catholic Education Commission NSW
  - the Diocese of Broken Bay and its parishes
  - medical practitioners
  - people providing educational, support and health services to the school, including specialist visiting teachers, sports coaches, volunteers, counsellors and providers of learning and assessment tools
  - assessment and educational authorities, including the Australian Curriculum, Assessment and Reporting Authority
  - people providing administrative and financial services to the school
  - anyone you authorise the school to disclose information to
  - anyone to whom the school is required or authorised to disclose the information to by law, including child protection laws
7. Personal information collected from students is regularly disclosed to their parents or guardians. On occasions information such as academic and sporting achievements, student activities and similar news is published in school newsletters, magazines and on our website. This may include photographs and videos of pupil activities such as sporting events, school camps and school excursions. The school will obtain permissions annually from the pupil's parent or guardian (and from the student if appropriate) if we would like to include such photographs or videos (or other identifying material) in our promotional material or otherwise make this material available to the public such as on the internet.
8. Parents may seek access to personal information collected about them and their son/daughter by contacting the school. Older students may also seek access to personal information about themselves. However, access may be refused in certain circumstances such as where access would have an unreasonable impact on the privacy of others, where access may result in a breach of the school's duty of care to the student, or where students have provided information in confidence. Any refusal will be notified in writing with reasons, if appropriate.
9. The school from time to time engages in fundraising activities. Information received from you may be used to make an appeal to you. It may also be disclosed to organisations that assist in the school's fundraising activities solely for that purpose. We will not disclose your personal information to third parties for their own marketing purposes without your consent.
10. If you provide the school with the personal information of others, such as doctors or emergency contacts, we encourage you to inform them that you are disclosing that information to the school and why.
11. The school may use online or 'Cloud' service providers to store personal information and to provide services to the school that involve the use of personal information, such as services relating to email, instant messaging and education and assessment applications. Some limited personal information may also be provided to these service providers to enable them to authenticate users that access their services. This personal information may reside on a cloud service provider's servers which may be situated outside Australia. Further information about the school's use of online or 'cloud' service providers is contained in the school's Privacy Policy.
12. The Diocesan Schools System Privacy Policy sets out how to make a complaint about a breach of privacy and how the school will deal with such a complaint.



# MERCY CATHOLIC COLLEGE

## PARENT REFERENCE

Daughter's Name: \_\_\_\_\_ Year \_\_\_\_\_ / 20\_\_\_\_\_

*Please complete **all questions** below and submit with the application for enrolment.*

1. What involvement do you have in your local parish / church? Eg: Mass, Ministry, financial assistance, other. Please state the name of your local Parish.

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2. What involvement do you have in your local community? Eg: different associations, sporting, etc.

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3. Why would you like your daughter to attend Mercy Catholic College?

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4. What will you do at home to support the faith development of your daughter?

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5. Mercy College encourages parent involvement and assistance in College activities. How are you able to assist in the enrichment of the Mercy College community?

- Parents and Friends Association *including Social Functions, involvement with the College Activities club or Sporting endeavours.*
- Canteen *volunteers are needed each weekday during school term.*
- Sport *help with managing or coaching a team.*
- College Educational Activities *including assistance with College debating, Science, chess, Maths clubs.etc*
- Other area of expertise you would be willing to share with our Community *(this could include maintenance; speaking to the student body about your profession, hobby or interesting life experiences or other activities you feel would enrich the community):*

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# MERCY CATHOLIC COLLEGE

## PARENT REFERENCE

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6. How did you hear about the College?

Student's sibling currently enrolled     Student's sibling currently on the waiting list

Relative with a connection to the school (for example, a parent or grandparent was a past student):

Name: \_\_\_\_\_ Relationship to student: \_\_\_\_\_ Leaving Year: \_\_\_\_\_

Name: \_\_\_\_\_ Relationship to student: \_\_\_\_\_ Leaving Year: \_\_\_\_\_

If you did not have any prior connections, we are interested to know how you found out about the College. Please indicate all that apply.

Open Morning/Day     Social Media     Print Advertising     Internet search

Personal contact     Recommendation (By Whom) \_\_\_\_\_

Other \_\_\_\_\_

7. Please advise in preference what other schools are you strongly considering for your daughter along with Mercy Catholic College.

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_



# MERCY CATHOLIC COLLEGE

## SCHOOL FEES, 2017

School Fees at Mercy Catholic College have two components:

1. those set by the Diocese of Broken Bay for systemic schools
2. those set by the College.

	Years	7-8	9-10	11-12
Diocesan School Fees per annum	1 <sup>st</sup> Child	\$3,294.00	\$3,421.00	\$3,914.00
	2 <sup>nd</sup> Child	\$2,635.20	\$2,736.80	\$3,131.20
	3 <sup>rd</sup> Child	\$1,647.00	\$1,710.50	\$1,957.00
	4 <sup>th</sup> and subsequent child	No charge		
College Education Fee	\$1,943.10 per student			
Digital Education Fee	\$300.00 per student Years 9,12			
Digital Education Fee	\$100.00 per student Years 7,8,10,11			
Parents & Friends Levy	\$120.00 per family per annum			
Diocesan Building Levy	\$940.00 per family per annum			

Accounts cover the full academic year but are issued at the start of Term 1. Standard payment terms are over 3 instalments in Term 1, 2 and 3. Monthly, fortnightly or weekly instalments are available on request to the College Office.

Some extracurricular fees e.g. Band Fees & Band Camp, Swimming Programme, some Elective Courses, Years 11 and 12 TAFE fees (approx.. \$1,500) etc. are not included in the School Education Fee.

Fees may be paid by cash, cheque, BPay or Credit Card.



# MERCY CATHOLIC COLLEGE

## APPLICATION FOR ENROLMENT

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### APPLICATION FEE

Student's Surname..... Student's Given Name .....

Entry Year (eg. 2018) ..... Entry Level (eg. Yr 7) .....

We enclose a cheque for \$250

Please debit my credit card with \$250

Visa

Mastercard

Cardholder's Name: .....

Card Number: \_ \_ \_ \_ / \_ \_ \_ \_ / \_ \_ \_ \_ / \_ \_ \_ \_

Expiry Date: ..... CCV .....

Please return to:

The Registrar  
Mercy Catholic College Chatswood  
101 Archer Street  
Chatswood NSW 2067

