Section A: Details  * Denotes required fields

IMMERSION PROGRAM – Entrance Test - Year 7 Intake 2017

Return form with payment by: Monday 16th May 2016  Cost: $ 50.00

*Student Name: ____________________________________________________________
*Parent Name: ____________________________________________________________
*Primary school: ___________________________________________________________________
*Email: ________________________________________________________________________

*Home phone no.: ____________________________ Mobile: ____________________________

* Home / Postal address: ____________________________________________________________

*Post Code: ________________________

*SIGNATURE(Parent or Guardian)
_________________________________________________________________________

Section B: Program of preference:

Your child will sit the test at Gladstone Park SC on **Saturday 21st May at 9am**. If your child is also applying for the SEAL program, please be reminded that it is not possible to participate in both the Language Immersion program and the SEAL program. In case your child intends to apply for both programs, please indicate your preferences here below by writing 1 next for your first choice and 2 for your second choice.

LANGUAGE IMMERSION               SEAL
___________________________________________________________________________________________

PAYMENT: YOU MIGHT LIKE TO USE THE OPTION BELOW OF PAYING BY BANKCARD, MASTERCARD OR VISA:

☐ MASTERCARD ☐ VISA ☐ CASH ☐ CHEQUE

CARD NUMBER  ___________ ___________ ___________ ___________ ___________ ___________

EXPIRY DATE : /                AMOUNT       $

SIGNATURE OF CARD HOLDER: ___________________________ NAME ON CARD_____________________

ISSUING TEACHER: Max Tosi