

PLEASANT HEIGHTS PUBLIC SCHOOL CHANGE OF DETAILS FORM

1.	CHILD'S NAME	CLASS
2.	CHILD 'S NAME	CLASS
3.	CHILD 'S NAME	CLASS

FAMILY MAILING TITLE :		
New Address (Number & Street address) :		
Suburb & Postcode :		
Home Telephone No:		
Father's Mobile :	Work No.	
Mother's Mobile :	Work No.	
Email Addresses :		

Parent/Guardian Signature :

EMERGENCY CONTACT (other than parents if possible)							
Contact 1			Contact 2				
Name							
Phone Number							
Relationship to family							

ADDITIONAL INFORMATION :

Return in person to : Pleasant Heights Public School, Alvan Parade, Mt Pleasant

Post to : Pleasant Heights Public School, PO Box 291, Fairy Meadow NSW 2519 *or Fax* : 42844079 *or E-mail:* pleasantht-p.school@det.nsw.edu.au