

## FOR THE PURPOSE OF KERIKERI HIGH SCHOOL IN-ZONE ENROLMENT

Date of Application			
I,			(Name of Mother/Father)
of			(Address of Mother/Father)
confirm that I am the Moth	er/Father of		
	(Stud	dent's Name) born	(Date of Birth)
and advise that my son/dau	ıghter is now living w	vith	
			(Name of Caregiver(s)
Residing at			(Address).
			(Name and Address).
And I make this solemn dec virtue of the Oaths and Dec		isly believing the same	to be true, and by
Signature of Declarant (Mo	ther/Father)		
Signature of Caregiver			
Declared at	this	day of	20
Before me:			
Deputy Registrar/Registrar of the Hig receive Statutory Declarations.	gh Court, Justice of the Peac	e, or Solicitor, or Notary Public	c, or Officer authorised to take and