



## CONTACT DETAILS/CONSENT FORM

To ensure that our communication reaches you, please ensure that your contact details are up-to-date. Kindly complete the below and e-mail the completed form to Registrar\_@GEMSEDU.COM

### STUDENT DETAILS

STUDENT NAME	GRADE
STUDENT NAME	GRADE
STUDENT NAME	GRADE
STUDENT NAME	GRADE

### PARENT/GUARDIAN DETAILS

Father's Name	Mother's Name
Father's Mobile	Mother's Mobile
Father's E-mail	Mother's E-mail
Name of Guardian (if applicable)	
Guardian Mobile	Guardian E-mail

### ADDRESS

Residence Phone  
Residence Location  
PO Box and City

### PHOTOGRAPHS/VIDEO CONSENT (CONSENT WILL BE IMPLIED IF NOT COMPLETE)

YES  
NO

I give permission for my child(ren) named above to be photographed/filmed and understand that the content may be used in school displays, on the school website, in social media channels and promotional materials.

Parent Signature  
Parent Name  
Date

PLEASE EMAIL COMPLETED FORM TO Registrar\_DAA@GEMSEDU.COM