



NELSON COLLEGE FOR GIRLS

Te Kura Tamawāhine o Whakatū

CLARICE JOHNSTONE HOUSE

Name: _____

2025 Application for Boarding



PIETAS PROBITAS ET

PLEASE PRINT CLEARLY WHEN COMPLETING THIS FORM



Please tick appropriate:

- 7 Night Boarding
- 5 Night Boarding



STUDENT DETAILS			
Legal Family Name:			
Legal First Name(s):			
Preferred First Name(s):			
Date of Birth:			
Country of Birth/Residency (proof to be attached):			
Siblings at NCG:			
Proposed date of entry:	Term:	Year:	Year level:

PRIMARY CAREGIVERS (Main contact/s i.e., who your daughter lives with the majority of the time)		
Mr/Mrs/Ms/Miss	Family Name	First Name
Relationship to Student		
Mr/Mrs/Ms/Miss	Family Name	First Name
Relationship to Student		

ADDRESS DETAILS:		PHYSICAL ADDRESS	POSTAL ADDRESS
No. and Street name: <small>(Include Emergency Services or Rapid No. for Rural Addresses)</small>			
Rural Delivery Number:			
Suburb:			
Town:			
Postcode:			
		Primary Caregiver 1	Primary Caregiver 2
Name:			
Telephone numbers:	Home:		
	Work:		
	Mobile:		
Email Address:			

SECONDARY CAREGIVERS (if parents are separated/divorced/remarried – this is the second parent's contact details)

Mr/Mrs/Ms/Miss	Family Name	First Name
Relationship to Student		
Mr/Mrs/Ms/Miss	Family Name	First Name
Relationship to Student		
ADDRESS DETAILS:	PHYSICAL ADDRESS	POSTAL ADDRESS
No. and Street name: (Include Emergency Services or Rapid No. for Rural Addresses.)		
Rural Delivery Number:		
Suburb:		
Town:		
Postcode:		
Telephone numbers:	Home:	
	Work:	
	Mobile:	
Email Address:		

HEALTH INFORMATION

Please advise if the student has, or has had, any medical or mental health issues. Failure to disclose this information at any time could result in any offer being withdrawn:

Payment for this application for boarding will be made as follows:

Please tick as appropriate:

- \$50 for a family resident in New Zealand
- \$200 for a family resident overseas with New Zealand residency

Please tick your preferred method of payment:

- Credit card. (give details below) *Please note: 3% surcharge will be added for all credit card transactions.*
- Internet banking (details below) – date payment made: _____

ELECTRONIC BANKING DETAILS:

Name of Bank: ASB Bank, Nelson

Account Name: Nelson College for Girls

Account No: 12-3193-0024036-00

Reference: Student's name, boarding

CREDIT CARD DETAILS:

Visa / Mastercard (please circle one)

Card No: ____ / ____ / ____ / ____

Name on card: _____

Expiry Date: __ / __

For the purposes of the Privacy Act 1993, I hereby acknowledge:

- 1 The information set out in this form has been provided voluntarily.
- 2 I / We had a choice as to whether to complete all parts of the form or not.
- 3 The information is being collected by the Board of Trustees of Nelson College for Girls for the purpose of providing a database of information relating to the future education, guidance, monitoring and reporting of the student's progress and pastoral care.
- 4 The information collected may be used for a variety of statistical and research purposes, while ensuring that no individual can be identified.
- 5 The information collected may be conveyed to the Old Girls' Association.
- 6 Nelson College for Girls is required to provide some personal information (ie name, current address, date of birth, gender, ethnicity or academic details) to specified agencies. These include other educational institutions and government agencies.
- 7 Photographs and videos taken of the student may be used in Nelson College for Girls publications and websites.
- 8 Parents may be contacted by the College electronically using the information provided.

Signed _____ Parent/Caregiver

PLEASE PRINT YOUR NAME HERE _____ Parent/Caregiver

Please enclose with your application the following:

confirmation of fee paid or to be charged

a copy of the student's latest school report

a character reference from someone who has known the student for a while (not a family member or teacher)

proof of residency – certified copy of birth certificate, citizenship certificate or passport

school enrolment form / or completed online

Please email this completed form to: boarding@ncg.school.nz