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8 King Street, Murwillumbah, NSW 2484

Expression of Interest

Please return completed forms to carla@thesmallschool.org.au

Please fill out a separate form for each child.

Parent / Carer's Name

Address

Email

Phone

Student's Name

Student's date of birth

Proposed date of commencement

Previous school / preschool / childcare / homeschool

Why are you interested in the Small School?

Any particular special needs, requirements, considerations we should be aware of? These can be physical, behavioural or emotional.

How did you hear about us?