STATUTORY DECLARATION OF IN-ZONE RESIDENCE AND OF CAREGIVERSHIP



IN THE MATTER of the Oaths and Declarations Act, 1957

AND

IN THE MATTER of an application to enrol a student at Howick College

I,	(First Names)	(Family Name)		 Occupation)	
Do	solemnly and sincerely of	, ,	·	• •	
1.	THAT I have read and understood the Howick College document titled "Requirements for In-Zon Enrolment" and I am aware that a student enrolled at Howick College may have his or her enrolmer annulled should any breach of those requirements be found.				
2.	THAT I am the parent/guardian/caregiver of:				
	(Student's First Names)		(Student's F	amily Name)	
3.	THAT I and the said	(Student Name)			
	Live permanently at	(Address)			
	Which is in the official Howick College Home Zone as described on the back of this Declaration.				
4.	THAT I undertake to be responsible for all behavioural, academic, financial or other issues relating to the schooling of:				
		(Student Name)			
5.	THAT I am aware that it is an offence under the Crimes Act 1961 to knowingly make a false declaration				
		N DECLARATION solemn nd Declarations Act 1957.		ly believing the sar	me to be true
SIG	GNATURE OF THE DEC	LARANT			
DE	CLARED AT Auckland th	nis day of	20	before me:	
 Sol	icitor / Justice of the Pea	ce			