# *MSL Resident Registration Form*

|  |  |
| --- | --- |
| **Property** |  |
| **Total Nights** |  |
| **Arrival / Check in Date** |  / / |
| **Departure / Check out Date** |  / / |
| Room Rental Amount $\_\_\_\_\_\_.00 |  | Per Week |
|  | Short term -under 6mths |
|  | Lease agreement – min 6mths |
| **Office Use Only:**Account Finalised By:Confirmation No:Room No: |  | Educational Facility |
|  | Employer |
|  | Other\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

## Resident Details

|  |  |  |  |
| --- | --- | --- | --- |
| **Title** |  | **First Name** |  |
| **Last Name** |  |
| **Home Address** |  |
|  |
| **State** |  | **Postcode** |  |
| **Country** |  |
| **Home telephone** |  |
| **Mobile telephone** |  |
| **Date of birth** |  |
| **Email** |  |
| **Nationality** |  |
| **\* Passport / Photo ID #** |  |
| **\* Passport / Photo ID expiry date** |  |
| **Vehicle registration**  |  |

### \*Please circle ID type and provide copy with registration form

### Education/Organisation Details

|  |  |
| --- | --- |
| **Name** |  |
| **Course / Department** |  |
| **Student ID**  |  |

**Dates of Study:**

|  |  |  |  |
| --- | --- | --- | --- |
| **Begin** |  / /  | End |  / /  |

### Other Important Information

Special Requests (dependant on availability)

Accessible room or Medical Considerations and Allergies, Female only apartment request, Other:

|  |
| --- |
|  |

**Emergency Contact Details**

|  |  |
| --- | --- |
| **Contact Name** |  |
| **Relationship** |  |
| **Email** |  |
| **Phone** |  |

### Do you identify as (Please Tick)

|  |  |
| --- | --- |
| **Aboriginal** |  |
| **Torres St Islander** |  |
| **Neither** |  |
|  |  |

### Employment/Career details (If applicable)

|  |  |
| --- | --- |
| **Name of current employer** |  |
| **Position** |  |
| **Work telephone** |  |
| **Occupation** |  |
| **Full time** |  | **Part time** |  | **Casual** |  |

#### Educational Agent (If Applicable)

|  |  |
| --- | --- |
| **Name of Agency** |  |
| **Name of contact person** |  |
| **Telephone** |  |

#### How did you hear about us?

|  |  |  |  |
| --- | --- | --- | --- |
|  | Google |  | Word of Mouth |
|  | Website |  | Facebook |
|  | Educational Institution |  | Agent |
|  | Other\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

### Declaration

I declare that the information given on this form is true and correct. I acknowledge the following:

1. I consent to MSL checking and collecting information and rental references from past agents, employers, referees, online searches to assess this tenancy application.
2. Money and Valuables brought to the property is done so at the guests own risk. MiHaven Student Living and Management shall not be responsible for any loss or damage to the guest’s property or belongings.
3. I agree that I am personally liable for all costs and charges incurred for the duration of my stay, either directly or indirectly.
4. I have read and understood the booking terms and conditions and will abide by the house rules.
5. I will update MSL with any changes to my employment, studies or circumstances and provide 2 weeks notice of any changes to the length of my booking.
6. By signing this form, I consent to my information and or any photographs or video taken, to be used for marketing and administration purposes, and waive any right to royalties or compensation arising from use of the images, recordings or materials. MSL guarantees not to disclose information to third parties.
7. Key lock out fees $20 and replacement key costs $50

**Applicant’s signature**

|  |
| --- |
|  |
| **Date** |  / / |