



uniting generations through play

Ages and Stages Playgroup Enrolment Form

When completing this form please print clearly.

PARENT/GUARDIAN DETAILS

Given Name: _____ Family Name: _____

Address: _____

Email Address: _____

Telephone: H: _____ M: _____

Relationship To Child/ren: _____

Language/s Spoken At Home: _____

Does Your Child/ren have any diagnosed Additional Needs? (Please Circle) Yes No

If yes, please provide details: _____

Are you a Family Day Care Educator/ Nanny? (Please Circle) Yes No

CHILDREN'S DETAILS

Name of Child _____ DOB / /

Name of Child _____ DOB / /

Name of Child _____ DOB / /

Are the children listed above immunised? (Please Circle) Yes No

EMERGENCY CONTACT

(Please provide details of someone other than parent attending who we can contact in the event of an emergency)

Name: _____

Telephone: H: _____ M: _____ B: _____

Address: _____

Relationship to Child/ren: _____

AREAS OF INTEREST

Select the options your child is interested in at the moment

- | | | |
|---|--------------------------------------|---|
| <input type="checkbox"/> Construction | <input type="checkbox"/> Music | <input type="checkbox"/> Playdough |
| <input type="checkbox"/> Craft and Painting | <input type="checkbox"/> Climbing | <input type="checkbox"/> Outdoor activities |
| <input type="checkbox"/> Loose Parts play | <input type="checkbox"/> Home Corner | <input type="checkbox"/> Other _____ |

NOMINATING PREFERENCES

- Please indicate your preferences for group times with 1 being the most preferred.

DAYS / HOURS	NUMBER PREFERENCE 1,2 or both
Tuesday 9.00am – 11.00am	
Thursday 9.00am - 11.00am	

- We will endeavour to allocate your first preference
- Only nominate times you are able to attend
- Sessions operating are dependent on enrolments

FEES

- Fees are \$20.00 per session per child and \$2.00 for each additional family child
- Fees are required to be paid each 5 session block to maintain your place
- We ask that you ensure your fees up to date please

Payment Method:

Direct Deposit

Ages and Stages Playgroup

Contact us for bank details

Square payment facility also available

CONSENT BY ENROLLING PARENT / GUARDIAN

I, _____ state that the personal and health information collected on this form is true and correct. I acknowledge that participation in the program is undertaken at my own risk. I understand that no liability of personal injury, loss or damage to personal effects is accepted by Ages and Stages Playgroup or its employees whilst attending this program.

PHOTOS

Do you consent for your child to be photographed whilst attending the playgroup? Yes No
 May they be published on our website/social media platforms with appropriate obscuring for privacy? Yes No

SIGNATURE: _____

DATE: / /

Privacy Notification: The personal and health information provided on this form is being collected by Ages and Stages Playgroup for the purpose of administering services at the Centre. We collect this information only for the purpose of providing our services, engaging with you and day to day program operations.

ADMINISTRATION

Enrolment start date	Day/s Allocated	Date Fees Paid