



2024 Playgroup Application

Student / Parent Details

Student Surname: _____ Student Given Name: _____

Date of Birth: / / Female Male

Parent 1 Surname: _____ Parent 1 Given Name: _____

Parent 1 Phone (H): _____ Parent 1 Phone (M): _____

Parent 1 Phone (B): _____ Email: _____

Parent 2 Surname: _____ Parent 2 Given Name: _____

Parent 2 Phone (H): _____ Parent 2 Phone (M): _____

Parent 2 Phone (B): _____ Email: _____

Address: _____

Suburb: _____ State: _____ Postcode: _____

Playgroup Details (please tick the day of attendance)

Please be aware payment is required (up-front) for the term and is non refundable.

Term 1	<input type="checkbox"/> Thursday	1 February to 11 April 2024	Cost \$55 (\$5 per week)
	<input type="checkbox"/> Friday	2 February to 12 April 2024	Cost \$50 (\$5 per week)
Term 2	<input type="checkbox"/> Thursday	2 May to 27 June 2024	Cost \$45 (\$5 per week)
	<input type="checkbox"/> Friday	3 May to 28 June 2024	Cost \$45 (\$5 per week)
Term 3	<input type="checkbox"/> Thursday	25 July to 26 September 2024	Cost \$50 (\$5 per week)
	<input type="checkbox"/> Friday	26 July to 27 September 2024	Cost \$50 (\$5 per week)
Term 4	<input type="checkbox"/> Thursday	17 October to 28 November 2024	Cost \$35 (\$5 per week)
	<input type="checkbox"/> Friday	18 October to 29 November 2024	Cost \$35 (\$5 per week)

Signature - By signing I declare the information provided is true and correct

Signature : _____ Date: / /

Print Name: _____