

Fairy Wren Playgroup Enrolment Form 2018



Please print carefully ☺

Parent/Guardian 1	Parent/Guardian 2
Name	Name
Address	Address
Phone/Mobile	Phone/Mobile
Email	Email
Signature	Signature
Date	Date

Health Care Card

Playgroup Assoc Membership Number

Child/ren's Name – eldest to youngest	Gender	Date of Birth	Approximate age at the beginning of 2018
E.g. Jane Smith	Female	21 August 2005	1 ½ yrs

Please indicate which group you're interested in attending in order of preference e.g. 1st, 2nd and 3rd.

Playgroup 1: Tuesday 9.15am to 11.15am	
Playgroup 2: Wednesday 9.15am to 11.15am	
Playgroup 3: Thursday 9.15am to 11.15am	
Playgroup 4: Friday 9.15am to 11.15am	

Do you or your child/ren have any allergies? (please list): _____

How did you hear about Fairy Wren Playgroup? _____

Office use only			
Enquiry date:	Date enrolled:	Commencement date	Paid:

For enquiries please contact: Tuesday, Wednesday, Friday: Karen Bright 0488230164
Thursday: Kristy Brake 0431833959