

Parent and Baby Group / Playgroup Application Form

Parent and Baby Group is open to expectant mothers, parents and babies up to 2 years of age.

Playgroup is open to children from 2 years of age until they begin Kindergarten at Silver Tree or turn 4.

Siblings under school age are welcome. Please provide information for all children attending Parent and Baby Group or Playgroup sessions with you, regardless of their age.

Application to enrol in year:					Application to enrol in term:				
Year:	2021	2022	2023	2024	Term:	T1 Jan to Apr	T2 Apr to June	T3 Jul to Sep	T4 Oct to Dec

I am applying for:				My child's age as at application date:			
Playgroup:		Parent and Baby Group:		Years:		Months:	

If applying for Playgroup, preferred day: (Number by preference and place a cross in box if unable to attend that day.)							
Tuesday		Wednesday		Thursday		Any	

1 st Child's details:							
Child's Surname:							
Child's First Name (s):							
Date of Birth:		Gender:	M	F	Aboriginal/Torres Islander Descent:	YES	NO

2 nd Child's details:							
Child's Surname:							
Child's First Name (s):							
Date of Birth:		Gender:	M	F	Aboriginal/Torres Islander Descent:	YES	NO

Parent/ Guardian Details:			
Mother's/Guardian's Details:		Father's/ Guardian's Details: Where details are same as mother, please leave blank.	
Surname		Surname	
First Name		First Name	
Home Address		Home Address	
Postcode		Postcode	
Home Tel		Home Tel	
Mobile Tel		Mobile Tel	
Email		Email	

Sibling(s) not attending Parent and Baby Group or Playgroup:

Name	Gender		Date of Birth	School (if applicable)
	M	F		
	M	F		
	M	F		

Dietary Requirements

If you or your child have any dietary requirements, please tick if the requirement is an allergy (severe symptoms), sensitivity (non-severe symptoms) or a lifestyle choice (no known reaction, but you choose not to consume this food type) to assist us in catering for the group.

Type of Food	Allergy	Sensitivity	Lifestyle Choice	Comment

Consent: (Circle or Highlight)

<p>Contact List Parent and Baby Group and Playgroup is a time of forging supportive friendships. To make it easy to contact new friends, we would like to distribute a contact list to parents in your group, but of course, we need your permission for this first. <i>I/we give permission for my contact details to be provided on this list.</i></p>	YES	NO
<p>Photographs/Videos From time to time, photographs or videos are taken of various school related activities. Sometimes these images are used in promotional material for the school or the weekly school newsletter. <i>I give permission for images of my child to be used in material for Silver Tree Steiner School.</i></p>	YES	NO

Enrolment Fee:

Fee NOT required to be added to the waiting list. Term fees are payable at the beginning of the term, so if you have been offered a place, please complete the following:

Payment by:	<input type="checkbox"/> Cheque	<input type="checkbox"/> EFTPOS	<input type="checkbox"/> Credit	<input type="checkbox"/> Bank transfer																								
If paying by bank transfer, I have used my child's surname as reference and attached or e-mailed proof of payment.	<input type="checkbox"/>	<input type="checkbox"/>	YES	N/A																								
I authorise you to debit my Visa/ Bankcard/ Mastercard for the following amount: (see the Fee Structure document)																												
Card Number:	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:25px;"> </td><td style="width:25px;"> </td><td style="width:25px;"> </td><td style="width:25px;"> </td> <td style="width:25px;"> </td><td style="width:25px;"> </td><td style="width:25px;"> </td><td style="width:25px;"> </td> <td style="width:25px;"> </td><td style="width:25px;"> </td><td style="width:25px;"> </td><td style="width:25px;"> </td> <td style="width:25px;"> </td><td style="width:25px;"> </td><td style="width:25px;"> </td><td style="width:25px;"> </td> <td style="width:25px;"> </td><td style="width:25px;"> </td><td style="width:25px;"> </td><td style="width:25px;"> </td> <td style="width:25px;"> </td><td style="width:25px;"> </td><td style="width:25px;"> </td><td style="width:25px;"> </td> </tr> </table>																											
Cardholders Name:																												
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Signature:																												

Agreement:

I confirm that the details given in this form are correct.
(If you are returning this form by e-mail, you can sign this on the day we first see you.)

Signature:	Relationship to child:
Date:	