



Springwood Kindy Playgroup Registration Form

Details of parent/care attending playgroup

Full name:

Mobile phone number:

Email address:

Emergency contact name:

Emergency contact relationship to parent/carer:

Emergency contact's phone number:

Details of all children attending playgroup with you

Full Name	Date of Birth	Male/Female

I acknowledge that the above details are correct and that I have read and agree to abide by the Springwood Kindy Playgroup Code of Conduct.

Signature: _____

Date: _____

