



Playgroup Expression of Interest

Parent / Guardian

SurnameFirst name.....

Address

..... Postcode

Phone..... Email.....

Proposed Pre-School 2015.....

Proposed School in 2016.....Accepted YES or NOT YET

Please circle your preferred two sessions:

Mon 9 – 11am

Tue 9 – 11am

Wed 9 – 11am

Thur 9 – 11am

Fri 9 – 11am

Please provide the following details:

	Surname	First Name	Gender	Date of Birth
1				
2				
3				

We are a supported playgroup which adopts the Learning Together approach with a numeracy and literacy focus. The program is based on national and international research affirming the crucial importance of the very early years of life in laying the foundation for children's learning and well-being.

Name.....Signed.....Date.....

PLEASE RETURN by Friday 7th March TO THE PRE-SCHOOL (8443 5758) OR SCHOOL OFFICE (8443 5544)