






Verna Hewitt (Grad Dip Ed., MA)
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Enrolment Form – Semester 1, 2012

Cooroy Library – Community Access Room				
 <p>newborn – 18 mnths TUES 11.30am FRI 11.15am</p>	 <p>18mnths – 3 yrs TUES 9.30am FRI 9.00am</p>	 <p>3-5 years FRI 10.00am</p>	 <p>Newborn – 5 years TUES 10.30am</p>	 <p>4½-7 years WED 3.30pm</p>



Registration

Child Information

Child's Name:
Surname Given Names

DOB (dd/mm/yy): Current Age (Years/Months):

Address:

Please enrol my child in – (eg. Class: Our Time Day/Time: Fri 9.00am)

Class: _____ Day/Time: _____

Parent Information:

Parent/Guardian Name/s:

Home Telephone:..... Mobile Phone:.....

Email:

Emergency Contact (Name/Ph):.....

Health & Development Information: Please include any information regarding your child's health or development (allergies, special needs) that you feel I should be aware of.

Registration Agreement: I release Verna Hewitt and Music2Grow from any liabilities that they may have to me and my child as a result of my child's participation in any and all Kindermusik and Music2Grow activities. I have read and agree to the Registration Policy.

Name:..... Signature:.....

Date:.....

How did you find out about Music2Grow? ☐ Kindermusik website ☐ Word of Mouth
☐ Flyer at..... ☐ Internet Search ☐ Other