

## Boyup Brook Family Playgroup

PO Box 186,

Boyup Brook, WA, 6244

Treasurers – Liz Twigg - Ph: 9767 3018

Tara Reid - Ph: 9765 1424

Enrolment Officers Lisa Hateley – Ph: 9765 1994

Kerri Ivey – Ph: 9767 1233

# ENROLMENT FORM 2008

**PLEASE FILL IN THE FORM AND RETURN WITH PAYMENT, THE DETAILS BELOW ARE NEEDED FOR YOUR INSURANCE PAYMENT TO PLAYGROUP W.A. IF YOU HAVE ANY QUESTIONS PLEASE PHONE A COMMITTEE MEMBER.**

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

PHONE NO. \_\_\_\_\_

EMAIL: \_\_\_\_\_

ONLY THOSE THAT ATTEND PLAYGROUP SESSIONS  
FIRST AND SURNAME PLEASE

CHILD'S NAME \_\_\_\_\_ Date of Birth \_\_\_\_\_

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**TERM FEES ARE \$20.00 FOR ALL 4 TERMS OR \$5.00 PER TERM**

**Insurance is \$27.00 Per Year OR \$13.50 if you hold a valid Health Care Card (Card MUST be sighted by enrolment officer)**

**If joining in 4<sup>th</sup> Term Insurance Payable in \$13.50**

**TICK APPROPRIATE BOX AND TOTAL YOUR AMOUNT BELOW.**

(These fees cover you to attend both Friday & Thursday Sessions there is no need to pay twice)

TICK

Term Fees Full 4 Terms	<input type="checkbox"/>	\$20.00
Term Fee	<input type="checkbox"/>	\$5.00
Full Year Insurance	<input type="checkbox"/>	\$27.00
Full Year Insurance - Concession	<input type="checkbox"/>	\$13.50
4 <sup>th</sup> Term Insurance	<input type="checkbox"/>	\$13.50
	<input type="checkbox"/>	
	<input type="checkbox"/>	
	<input type="checkbox"/>	
<b>TOTAL OWING</b>	<input type="checkbox"/>	<b>\$</b>

ALL FEES MUST BE PAID BY 7<sup>TH</sup> OF MARCH 2008 TO COVER US FOR INSURANCE

**\* IF PAYING BY CHEQUE PLEASE MAKE ALL CHEQUES PAYABLE TO BOYUP BROOK FAMILY PLAYGROUP. RETURN PAYMENTS TO LISA HATELEY OR KERRI IVEY ENROLMENT OFFICERS. IF YOU HAVE ANY PROBLEMS PAYING YOUR FEES PLEASE SPEAK TO TARA or LIZ TO WORK SOMETHING OUT, OR VIA POST ALONG WITH THIS FORM TO -  
BOYUP BROOK PLAYGROUP  
P.O. BOX 186  
BOYUP BROOK 6244 WA**

Thank you.