

# Stepping Stones to Kindy Registration Form

Family Name: \_\_\_\_\_

Child Given Name: \_\_\_\_\_ DOB: \_\_\_\_\_

Child Given Name: \_\_\_\_\_ DOB: \_\_\_\_\_

Child Given Name: \_\_\_\_\_ DOB: \_\_\_\_\_

Parent Full Name: \_\_\_\_\_

Mobile Phone Number: \_\_\_\_\_

Address: \_\_\_\_\_

Email Address: \_\_\_\_\_

- I am registering for my child(ren) named above to participate in the current/next school year Stepping Stones to Kindergarten Program offered by the Poseidon P&C and will pay the \$50 contribution.
- I understand that I must become a P&C member for insurance purposes to participate in the Stepping Stones Program. I will fill out the P&C Membership Form and pay the \$1 membership.
- I understand that children's images and/or their work may appear in school newsletters or publications to promote the program.

Parent Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Payments to the P&C can be made by bank transfer into the [P&C bank account](#), BSB: 016 246, Account Number: 191 123 694, Reference: **enter your name and "Stepping Stones"**. Payments in cash will be accepted in the school front office, however bank transfers are preferred.

Please return completed forms with proof of payment (receipt) to the school front office or email to [poseidon.ps@education.wa.edu.au](mailto:poseidon.ps@education.wa.edu.au)