



St John's Presbyterian Church Bendigo

Friday Playgroup Family Enrollment Form 2026

Family name (parent/carer who brings child/ren to playgroup)	
First name	
Address	
Postcode	
Telephone number	Mobile
Email address	
Relationship to child/ren	

Name of child attending playgroup	Date of birth	Relevant medical information eg. allergies, special requirements
1.		
2.		
3.		
4.		

Person to be contacted in case of emergency	Family doctor
Name	Address
Relationship to child	
Telephone number	Telephone number

Permission given to be included in Playgroup Family Contact List?	YES	NO
Permission given for child/family to have photo taken?	YES	NO
Permission given for photos to be displayed in the Hall?	YES	NO
Permission given for photos to be used in end-of-year slide show?	YES	NO

Other information and/or comments:
How did you hear about Playgroup?
Are you involved in a Church or Fellowship Group?
Is there anything you would like us to know or think we need to know?
Do you have any questions?

Signed.....

Date.....