



## Playgroup Details

Our Lady of Grace School Playgroup  
38 Beadnall Terrace, Glengowrie SA 5044

T: 08 8177 9100

[playgroup@olog.catholic.edu.au](mailto:playgroup@olog.catholic.edu.au)

## Family Details

Parent/Carer Information:  Miss  Ms  Mrs  Mr  Dr

Surname: ..... First Name: ..... DOB: .....

Address: ..... Suburb: ..... Postcode: .....

Email: ..... Phone: .....

Relationship to child(ren):  Mother  Father  Grandparent  Carer  Other .....

Culture:  Aboriginal  TSI  Both  No  Other .....

Country of birth: .....

Language spoken at home:  English  Other: *please specify* .....

I give authority for photos of myself and/or my children to be used by OLOG Playgroup  Yes  No

## Child(ren)'s Details

Name of Child Attending (including surname)	Child's DOB	Gender	Culture	Photo consent (Details over Page)	Additional Needs, Disability, Allergies, Other (please list):
1.		<input type="checkbox"/> M <input type="checkbox"/> F	<input type="checkbox"/> Aboriginal <input type="checkbox"/> TSI <input type="checkbox"/> Both <input type="checkbox"/> No <input type="checkbox"/> Other	<input type="checkbox"/> Yes <input type="checkbox"/> No	NDIS y/n CALD y/n DIAGNOSIS y/n
2.		<input type="checkbox"/> M <input type="checkbox"/> F	<input type="checkbox"/> Aboriginal <input type="checkbox"/> TSI <input type="checkbox"/> Both <input type="checkbox"/> No <input type="checkbox"/> Other	<input type="checkbox"/> Yes <input type="checkbox"/> No	NDIS y/n CALD y/n DIAGNOSIS y/n
3.		<input type="checkbox"/> M <input type="checkbox"/> F	<input type="checkbox"/> Aboriginal <input type="checkbox"/> TSI <input type="checkbox"/> Both <input type="checkbox"/> No <input type="checkbox"/> Other	<input type="checkbox"/> Yes <input type="checkbox"/> No	NDIS y/n CALD y/n DIAGNOSIS y/n
4.		<input type="checkbox"/> M <input type="checkbox"/> F	<input type="checkbox"/> Aboriginal <input type="checkbox"/> TSI <input type="checkbox"/> Both <input type="checkbox"/> No <input type="checkbox"/> Other	<input type="checkbox"/> Yes <input type="checkbox"/> No	NDIS y/n CALD y/n DIAGNOSIS y/n

## Emergency Contact Details for Parent / Caregiver

Name: ..... Phone Number(s) .....

# Conditions of Enrolment

By signing this form you are stating that you understand that it is your responsibility to maintain a safe environment for all children attending OLOG Playgroup.

The Coordinator is legally required to report any suspicions of child abuse or neglect (please contact Playgroup SA for information on the free Safe Environments for Children and Young People Training that is provided to Playgroup Coordinators).

Please Note: Personal information is confidential, not for commercial purposes and is collected in accordance with the Commonwealth Privacy Act (1988) and the 13 Australian Privacy Principles (2014).

OLOG Playgroup collects details from enrolled families and maintains a secure database. OLOG Playgroup will never sell or give away personal member information.

Photo Consent – By giving consent above for your child/ren’s photo and your photo to be taken during Playgroup and this can appear in the following ways:

- In the Playgroup Newsletter
- In the Children’s Record books
- On the OLOG Facebook page
- On the OLOG School website

Signature: ..... Date: .....

**Thank you for joining the OLOG SPICE Playgroup community.**

Please send completed form to:

Our Lady of Grace School, 38 Beadnall Terrace, Glengowrie SA 5044  
Alternatively email to [playgroup@olog.catholic.edu.au](mailto:playgroup@olog.catholic.edu.au)

