

# OOSH AT SGCS

## 2017 EXPRESSION OF INTEREST

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 SOUCI NSW 2219  
 Phone: 0429 031 796  
 Email: [sgcsoosh@gmail.com](mailto:sgcsoosh@gmail.com)  
 Website: [www.ooshatsgcs.com.au](http://www.ooshatsgcs.com.au)

*I am interested in my child/ren attending OOSH At SGCS in 2017.  
 The first step in my family's enrolment process is to submit this completed, 'Expression of Interest' form to OOSH At SGCS, either via email, in person at Kindergarten Orientation Day, or via mail. Once the form has been received, OOSH At SGCS will contact my family direct, providing further information about the service and how to formally enrol.  
 Further information is also available at [www.ooshatsgcs.com.au](http://www.ooshatsgcs.com.au)*

### Parent/ Guardian Details

Surname: \_\_\_\_\_ First Name: \_\_\_\_\_  
 Address: \_\_\_\_\_ Postcode: \_\_\_\_\_  
 Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_ Mobile: \_\_\_\_\_  
 Email Address: \_\_\_\_\_

### Child Details

Child's Surname: \_\_\_\_\_ Child's First Name: \_\_\_\_\_  
 Gender: Male [  ] / Female [  ] Date of Birth: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

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### Enrolment Details

Please circle Care type: Permanent / Casual  
 Days of attendance: Please tick the required days of care

Session	Monday	Tuesday	Wednesday	Thursday	Friday
Before School Care					
After School Care					

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_