



Toddler Kindy **GymbaROO** Bathurst

'A FUN LEARNING EXPERIENCE'

PO Box 1128, Bathurst NSW 2795

Telephone: (02) 6332 9002 - Email: bathurst@gymbaroo.com.au

OFFICE USE

Date:

Membership No:

MEMBERSHIP FORM

Term 1 Term 2 Term 3 Term 4 2012 **Wednesday** **Thursday**

**Subject to availability*

Childs Name:..... Surname:.....

Age: Date of Birth:..... Male Female

Address:

Suburb: Postcode:.....

Telephone: Mobile:..... Fax:.....

Email:

How did you hear about us?..... Referred by:.....

If your child has an allergy/medical/developmental/educational problem please specify details (including medication):

.....

1. Parent/Guardian Name:.....

2. Parent/Guardian Name:

In Case of Emergency - Contact Name & Phone:.....

DECLARATION

I (name) of (address)

am the parent/guardian of (name of child)

I acknowledge that both my child and I are parties to a contract with Toddler Kindy GymbaROO Bathurst ABN 15 097 344 413 ("TKG") and that the terms of that contract include:

I am required to supervise my child and have responsibility for the care of my child while they are at the Centre. Both I and my child release and hold harmless TKG and Toddler Kindy Gymbaroo Pty Ltd ACN 006 166 141 and their servants agents and officers from and against any liability to either of us howsoever arising including without limiting the generality of the foregoing arising from or as a result of negligence. In no circumstances shall TKG be liable for special or consequential damages. Without limiting the generality of the foregoing, in no circumstances shall the liability of TKG for any cause or on any account exceed the sum of any fees paid by me or any other person on behalf of my child.

The TKG Privacy Policy detailing our handling of personal and sensitive information is available upon request. You may request access to information held about you or your child by contacting the TKG Privacy Officer. To facilitate both the operation of the Toddler Kindy GymbaROO System and Toddler Kindy GymbaROO Centers and the granting of franchises to other organizations to provide the same services, it may be necessary for us to disclose your personal and sensitive information to certain third parties, to enable them to undertake specified management, administration and advisory services. These third parties include TKG's licensed franchise operators; consultants we engage to assist customers; organizations involved in all accounting, auditing and due diligence enquiries by the franchisee or on behalf of the franchisee relating to the setting up or maintenance of a franchise; organizations involved in a transfer or sale of all or part of the assets or business of TKG; organizations involved in managing our corporate risk and funding functions; general and specialist medical practitioners; our insurers; regulatory authorities, if required by law; and anyone else to whom you authorize us to disclose it.

TKG would also like to keep you in touch with developments about our system, and newsletters about new classes or Centres. Please mark the box with a cross if you do not want your personal or sensitive information to be used for direct marketing purposes

I acknowledge that I have been provided with an opportunity to read the TKG Privacy Policy. I accept that the collection, use and disclosure of my personal or sensitive information is necessary for the purposes described in the TKG Privacy Policy. I understand that TKG will not be able to provide me with their services without this consent.

_____/_____/_____
Date

Signature

IMPORTANT

Children's Accident Insurance is only effective upon the return of this completed form to your centre.



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PAYMENT FORM

Term 1 Term 2 Term 3 Term 4 2012

Child/Childrens Name(s): Surname:

Contact Number:

Payment Amount

- Walkers - 4 Years \$155.00 (inc GST)
- Mobile Babies \$110.00 (inc GST)
- Non-Mobile Babies \$90.00 (inc GST)

* 20% discount applies to additional family members

Payment Method

Credit Card (VISA/Mastercard)

Total Amount Payable:.....

Card Number:

Name on Card:

Expiry Date: CVV Number * :

Signature:

* Your CVV Number is the 3 digit security number located on the back of your VISA/Mastercard

Bank Cheque/Money Order (no personal cheques please)

Bank Cheque/Money orders can be made payable to:

"Toddler Kindy GymbaROO Bathurst"

Direct Deposit - Please use your surname or phone number as the payment reference.

Bank: Westpac

Account Name: Toddler Kindy Gymbaroo Bathurst

BSB: 032099

ACC: 261775

Please return this form to:

Toddler Kindy GymbaROO Bathurst, PO Box 1128 Bathurst NSW 2795