MEMBERSHIP FORM

'A FUN LEARNING EXPERIENCE'

Membership No.

Centre:

Day:

Session:

TERM 1: ☐ TERM 2: ☐ TERM 3: ☐ TERM 4: ☐ YEAR: ☐☐☐☐

CHILD'S NAME: SURNAME:

AGE: ☐ Years ☐☐ Months DATE OF BIRTH: MALE / FEMALE (circle)

ADDRESS: MOBILE:

SUBURB: POSTCODE: PHONE:

EMAIL:

If your child has any medical/developmental/ learning problem(s), please specify details:

Medication:

How did you hear about us?

Referred By:

PARENT/GUARDIAN NAME:

OCCUPATION (optional):

I (full name)

of (address)

am the parent/guardian of (child's name)

I acknowledge that both my child and I are parties to a contract with
SYDNEY PLAY AND LEARN PTY LTD ABN: 62 167 019 614
who is the operator of the TKG Centre, and that the terms of that contract include:

I am required to supervise my child at all times and have responsibility for the care pf my child while they are at the centre. Both I and my child release and hold harmless the centre and Toddler Kindy Gymbaroo Pty Ltd (TKG) ACN: 006 166 141 and their servants agents and officers from 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 circumstance shall TKG or the centre be liable for special or consequential damages. Without limiting the generality of the foregoing, in no circumstance shall the liability of TKG or the centre 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 TKG System and TKG Centres and the granting of the franchises to other organizations to provide the same services, it may be necessary for us to disclose your personal and/or 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; organisations 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; organisations involved in a transfer or sale of all or part of the assets or business of TKG; organisations involved in managing our corporate risk and funding functions; general and specialist medical practitioners; our insurers; regulatory authiorities, if required by law; and anyone else to whom you authorise us to disclose it.

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

I acknowledge and agree to respect the privacy of other parents and children and the confidentiality of TKG and the Centre by not taking photographs, video or other recordings in the TKG Centre without the prior consent of the operator of the Centre. I acknowledge that I may be asked to agree to sign a more detailed agreement before that consent is provided.

I acknowledge that I have been provided the 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 neither TKG or the Centre will be able to provide me with their services without this consent.

Date Signature

IMPORTANT

Childrens Accident Insurance is only effective upon the return of this completed form to your Centre.