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ABN: 68 441 366 835

Please attach  
a **colour** photo  
of your **Star** here.

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# Student Detail Form

**Section A Student Details:** Boy  Girl

**Group Day:** ..... **Time** .....

Full name of child: .....

**Parents:**

Date of birth: ...../...../..... Age .....

Father's name: .....

Home address: .....

Mobile: .....

Sub: ..... P.Code .....

Mother's name: .....

Home Phone: .....

Mobile: .....

Main e-mail for communication purpose: .....

## **Section B Emergency Contact** (Person to contact in case of an emergency when parents cannot be reached)

Name: ..... Tel/Mobile: .....

## **Section C Collection of Children** (Children will only be picked up by person named below - unless advice otherwise)

Name: ..... Tel/Mobile: .....

Name: ..... Tel/Mobile: .....

## **Section D Health Records** Is there any health or medical condition that requires the attention of staff? If yes, provide details:


Drug allergies? ..... Food/Drink allergies? .....

Are there any others issues of concern that we should be made aware of? .....

## **Section E Parental Consent Form**

During the pre-school year there are occasions when photographs of your child may be taken by staff of "Bravissimi" or authorised photographers only. Your authorization to use photo/s of your child in school division publications (brochures, annual reports, newsletters, advertisements, marketing, leaflets, or any other use such as for training, educational or publicity purposes etc.) is requested. Student names will not appear in these publications. Please sign the photography section to provide the school with consent for photo usage.

I/we, ..... the parent(s)/guardian(s) of children named above: hereby give "Bravissimi" permission to use any still and/or moving image being video footage, photographs and/or frames and/or audio footage.

parent(s)/guardian(s) signature: ..... Grazie!  Click.