

REGISTRATION FORM 2023

First Name	Surname		
Date of Birth	Year level		
Street Address			
Postal address			
Parent/Guardian/Caregiver's names			
Home phone	Mobile phone		
Medicare number	Expiry date		
Please list any health conditions staff should be aware of:			

STARS CODE OF CONDUCT

- * Respect: for all Stars and School staff, and peers.
- * Respect: for Stars and School premises and equipment.
- * Honesty: in all Stars and class activities
- * Commitment: to school attendance and participation.
- * Commitment: to appropriate behaviour.
- * Commitment: to displaying the Stars values at all times.
- * Effort: towards attaining the attendance benchmark for all Stars camps and activities.

I	accept	the	responsibility	of
being a committed Stars member.				

Signed:	Da	nte:



CAREGIVERS' CONSENT FORM 2023

Stars members participate in a range of activities that require them to travel to a variety of locations in the local area. For Stars members to be involved in community activities, sports and day excursions, etc., we require your permission/consent to allow your daughter to participate.

Please circle

1. I give permission for my daughter to be a member of the Stars program.

Yes No

2. I give permission for my daughter's photo to be taken and used on the Stars website and or newspapers / television etc.

Yes No

3. I give permission for my daughter to attend excursions within the local area, including local sport (which may be located at the pool or gymnasium) and reward activities.

Yes No

4. I give permission for my daughter to travel in the school bus or Stars vehicle to attend the above within the local area.

Yes No

Parent/Guardian/Caregiver's name:

Signed: _____ Date: _____

The Stars staff look forward to your support and input into the program as we work toward building our relationship with the caregivers and supporters of the Stars girls and the program.

Thank you & kind regards.