



Kookaburra Avenue Werribee, Victoria 3030
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FOUNDATION CONSENT FORM

I _____(Parent/Guardian Name)

Hereby give permissions for

Wyndham Park Primary School

to receive information (written and/or verbal) from my child's Early Childhood Educator. I also understand that representatives from Wyndham Park Primary School may attend my child's Kindergarten/Child Care Centre to observe my child to assist with transition into Foundation 2017.

_____(Childs name)

_____(Date of Birth)

_____(Name of Kindergarten or Child Care Centre)

Signed: _____(Parent/Guardian)

Date: _____