



# Tewantin State School OSHC

## CHANGE OF DETAILS FORM

### CHILD/REN'S PROFILE.

First Name	Surname	Allergy/Illness	D O B	Gender	Class
1.					
2.					
3.					
Address					

### PARENT PROFILE

First Name	Surname	Relationship to Child	Mobile:	Email
Address			Postal Address <i>if different</i>	
Occupation	Work Address		Work	Parent CRN

### EMERGENCY CONTACTS, OTHER THAN PARENT/S, WITH AUTHORITY TO COLLECT CHILD/REN.

First Name	Surname	Relationship to Child	Mobile:	ID Licence Number
First Name	Surname	Relationship to Child	Mobile:	ID Licence Number

Parent Signature \_\_\_\_\_ Date \_\_\_\_\_ Changes Updated By \_\_\_\_\_ Date \_\_\_\_\_