



Assisting Application Form

Name Phone Number
Address
.....Postcode Course Date

I wish to apply to assist at Melbourne *Breaking Free*

I wish to apply to assist at Canberra *Breaking Free*

Please send information on *Breaking Free* to the following families.
I have their permission to include their names.

Surname Parents' first names

✓ Home Phone Work phone

Child's name Age School Year

Address Town Postcode

Surname Parents' first names

✓ Home Phone Work phone

Child's name Age School Year

Address Town Postcode

Surname Parents' first names

✓ Home Phone Work phone

Child's name Age School Year

Address Town Postcode

Surname Parents' first names

✓ Home Phone Work phone

Child's name Age School Year

Address Town Postcode

Post or fax to *Breaking Free* at address below.

get ready FOR a BRIGHTER FUTURE!

Breaking Free Pty Ltd

199 High Street, Avoca, Victoria, Australia 3467. Phone 5465 3166 Fax 5465 3177. WEB www.breakingfree.org.au