

REGISTRATION FORM for 'Caring for Kimberley' School Competitions

Please Circle: STATIC DISPLAY PECHA KUCHA

Teacher name: _____ No of Students: _____

School and Year Level: _____

Best Method of Contact
(email/phone/postal): _____

Return to: kimberleytoadbusters@canetoads.com.au PO Box 1188, Kununurra WA 6743