



Enrol Now (02) 4396 4707

## Waiting List Application Form

Child – Details					
Child's last name:					
Child's first names:					
Child's date of birth:	/	/	Male	Female	
Parent's Names:	Parent 1:	Parent 2:			
Child's postal address:					
Child's residential address:				Post Code:	
Home phone:					
Mobile:	Parent 1:	Parent 2:			
Email:					
Nationality:					
Languages spoken in home:					
Languages child speaks:					
Going to school:	2023	2024	2025	2026 2027	
Known additional needs/anaphylaxis/allergies:					
Tick any that apply:	<input type="checkbox"/> Aboriginal/Torres Strait Islander <input type="checkbox"/> English as a second language		<input type="checkbox"/> Both parents born overseas <input type="checkbox"/> Low Income Health Care Card Holder		
Preferred Attendance					
Date care required from	/	/			
	Monday	Tuesday	Wednesday	Thursday	Friday
(Tick preferred days)					
Are you flexible with days?	Yes		No		
Are you flexible with your start date?	Yes		No		
Parent Signature:					
Date:	/	/			

NB: Please note that this form is not a guarantee that your child will be offered a position. Families are required to update the preschool with any changes to the waiting list application.