

Palmwoods Community Kindergarten & Preschool
28 Churchill St
Palmwoods Qld 4555
Ph (07) 5445 9027
Fax (07) 5445 9047
palmwoodskindy@gmail.com



WAITING LIST ENROLMENT

I wish to enter the following child on the enrolment waiting list:

CHILD'S FULL NAME: _____

DATE OF BIRTH: _____

PARENT / GUARDIAN NAMES: _____

ADDRESS: _____

PHONE: _____ MOBILE: _____

EMAIL: _____

I tender herewith the waiting fee of \$10.00 and acknowledge the following conditions:

1. The fee paid will become the property of the Committee absolutely and will be non-refundable.
2. It is the responsibility of the parents to advise any change to contact details.
3. The Director will contact the parents at the email address or postal address recorded when enrolment is due.
4. In the event of no response to the approach (as detailed in 3 above) within 14 days, the child's name will be deleted from the list.
5. Any subsequent application for enrolment of that child will be treated in order of receipt acceptance, and will depend on availability of positions.
6. Any re-admittance of a child's name to the waiting list subsequent to removal in term 4 will attract a further fee of \$10.00.
7. Please list any additional needs of which you are aware that your child may require during his or her enrolment at the centre: _____

Payment options: Cash (no EFT) or direct to Palmwoods Community Kindergarten
BSB: 638-070 AC: 7334540 (Please use your child's name as the reference)

If for any reason, your child may need special assistance e.g. special facilities, equipment or additional support staff, notify the centre as soon as possible so that the centre can plan for facilities/funding to be applied for, to best meet the needs of your child.

PLEASE NOTE: This information is requested to assist the centre in long term planning for the successful inclusion of the child with special needs. The information obtained WILL NOT be used to deny or delay enrolment of the child involved. At the same time, there is no guarantee of enrolment.

PARENT'S SIGNATURE: _____

OFFICE USE ONLY

RECEIVED _____

RECEIPT NO. _____

SIGNED _____

GROUP _____