



# Florence Kindergarten

ABN: 790 478 707 85

florencekindy@bigpond.com



## Waiting List Application Form

Birth Date			Pre-Prep @ Florence	Prep	Year 1
Born	1/07/2018	30/06/2019	<b>2023</b>	2024	2025
Born	1/07/2019	30/06/2020	<b>2024</b>	2025	2026
Born	1/07/2020	30/06/2021	<b>2025</b>	2026	2027
Born	1/07/2021	30/06/2022	<b>2026</b>	2027	2028
Born	1/07/2022	30/06/2023	<b>2027</b>	2028	2029

**Child's Name:** \_\_\_\_\_

**Date of Birth:** \_\_\_\_\_ **Male/Female:** \_\_\_\_\_

**Year of Entry to Kindergarten:** \_\_\_\_\_

*Are there any additional needs of which you are aware that your child may require during his/her enrolment at the centre?*

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

**Parent/Parents' Names:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Telephone:** \_\_\_\_\_

**Email Address:** \_\_\_\_\_

*Applications must be accompanied by a \$20.00 (including GST) Waiting List Fee.  
BSB – 034059 A/C – 137816 Ref – Childs Name  
Email completed application and payment receipt to – [florencekindy@bigpond.com](mailto:florencekindy@bigpond.com)*

### Office Use Only

Date of Application: \_\_\_\_\_ Receipt No: \_\_\_\_\_

Payment Made By: \_\_\_\_\_ Signature: \_\_\_\_\_

*Where children come first*