



Kindergarten Wait List Application

Please read before completing this form

1. Lodgement of this form does not guarantee your child will be offered a place.
2. There is a \$10 administration fee payable on lodgement of this form.
3. This form is a waitlist application only.
4. If your child is offered a place, we will ask you to complete an enrolment form to formalise the enrolment for your child.
5. Please submit a separate form for each child.
6. Please write in BLOCK LETTERS.
7. A range of information is gathered for legislative and statistical purposes.
8. Please complete all sections of this form (front and back) to help us process your application as soon as possible.

Child

First Name: _____ Last Name: _____

Date of birth: _____ Gender: Male Female

Home address: _____

Suburb: _____ State: _____ Postcode: _____

Year to attend kindy - please tick relevant year according to your child's date of birth

- | | |
|---|---|
| <input type="checkbox"/> 2022 (born 1 July 2017 – 30 June 2018) | <input type="checkbox"/> 2025 (born 1 July 2020 – 30 June 2021) |
| <input type="checkbox"/> 2023 (born 1 July 2018 – 30 June 2019) | <input type="checkbox"/> 2026 (born 1 July 2021 – 30 June 2022) |
| <input type="checkbox"/> 2024 (born 1 July 2019 – 30 June 2020) | <input type="checkbox"/> 2027 (born 1 July 2022 – 30 June 2023) |

Preferred kindergarten session

- GREEN TREE FROG GROUP 8.20am - 4.00pm
2 long days attend every Monday and Tuesday
- GECKO GROUP 8.20am - 2.35pm
5 day fortnight attend Wednesday, Thursday and every 2nd Friday

Parent/Guardian

First Name: _____ Last Name: _____

Relationship to child: _____

Phone (mobile preferred): _____

Email address: _____

Is your child listed on an approved concession card? Yes No

Type of concession card: Health Care Card
 Pensioner Card
 Veterans Affairs Card

Does your child identify as: Aboriginal Torres Strait Islander
 A&TSI South Sea Islander
 Not Indigenous Decline to Answer

Does your child have an additional need or medical condition? Yes No

If yes, please provide details below. This information will be used to support your child if an enrolment offer is made.

How did you hear about our kindergarten?

- | | |
|---|--|
| <input type="checkbox"/> Word of mouth | <input type="checkbox"/> Returning family |
| <input type="checkbox"/> Google search | <input type="checkbox"/> Social Media/Facebook |
| <input type="checkbox"/> Flyer/brochure | <input type="checkbox"/> C&K Website |
| <input type="checkbox"/> Other: _____ | |

Waitlist application agreement

- I have provided correct information and agree to notify C&K Gordonvale if my circumstances change.
- I understand that the information I have provided will be used for the purposes of being considered for a place at C&K Gordonvale.
- I understand that C&K regards my information as confidential and has policies in place to ensure the protection of this information.
- I understand that this data may be used for statistical purposes.
- I am the legal guardian of the child and have the authority to provide information contained in this form.
- I acknowledge that by completing this wait list application it does not confirm a placement at C&K Gordonvale.

Guardian signature: _____ **Date:** _____

What happens next?

Once your application is received, we may contact you to request further information and/or clarification on the information you have provided. When a position becomes available, an enrolment offer will be made and we will contact you. Please feel free to contact us at any time.

For direct deposit

Name: Gordonvale Community Kindergarten BSB: 704-640 A/c #: 64184898
Please leave reference - **WAIT FEE [CHILD'S NAME]**

Office Use

Receipt No.		Date	
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