



WAITLIST APPLICATION – NEW STUDENT

By completing and lodging the form below your child's name will be placed on our Waitlist. When a place becomes available we will contact you to commence the enrolment procedure.

We would appreciate if you could keep us informed of changes to your details so we can contact you.

There is a non-refundable Waitlist fee of \$25.00. Payment can be made by:

- Cash Cheque (made out to Larool Pre-school Inc)
- EFT (BSB: 939-200, Account: 849 803 606) Date Paid: _____ Ref: Child Surname and Initial

PLEASE FILL IN ALL AREAS OF FORM

Child Information

Full Name: _____ Any other or former name(s) of the child: _____

Date of Birth: _____ Home Telephone Number: _____ Gender: Male Female

Home Address: _____ Year your child is eligible to attend school (turns five (5) years of age on or before 31st July): 2019 2020 2021 Unsure

Post Code: _____ Intended Local School: _____

Parent / Guardian Information

Mother / Parent / Guardian One		Father / Parent / Guardian Two	
Name: _____		Name: _____	
Mobile #: _____	Work #: _____	Mobile #: _____	Work #: _____
Email Address: _____		Email Address: _____	
Are you: <input type="checkbox"/> working <input type="checkbox"/> studying <input type="checkbox"/> volunteering (please tick appropriate box)		Are you: <input type="checkbox"/> working <input type="checkbox"/> studying <input type="checkbox"/> volunteering (please tick appropriate box)	

Days of Care Required:

We offer four different groups, please tick your preference:

- Group 1 – Monday and Tuesday
- Group 2 – Monday, Tuesday and Wednesday
- Group 3 – Wednesday, Thursday and Friday
- Group 4 – Thursday and Friday

Please note these groups may change depending on availability and requirements. Priority is given to children at least four (4) years old on or before 31 July in that preschool year and children three (3) years and over who are:

1. from a low income background (Health Care Card);
2. identify as Indigenous

Date care is required from: _____

(Please note, if your child does not turn three (3) at the beginning of the year, you will be charged the daily fee to hold your child's place. Also, it may not be possible to commence on the above date)

Are you flexible on the days you have selected? Do you currently have any child care for this child? Yes No

Yes No If yes, where: _____

Additional Comments: _____

Family Information

Cultural and/or Ethnic Identity: _____ Languages spoken in the home: _____

Special requirements concerning this child (allergies/illness/additional needs): _____

Has a sibling ever attended Larool Pre-school? Yes No If Yes, Name/s: _____

Parent Signature: _____

Date of application: _____

How did you hear about us? (please tick appropriate box)

- Word of Mouth Web Search Banner
 - Letterbox Drop Local Paper Other
- If "Other", please specify: _____

Office Use Only

Date Paid: _____ Received: _____

Class Placed: _____

Days: _____ Start Date: _____