



APPLICATION FOR ENROLMENT

Date of Application:

Child's First Name/s:

Surname:

Gender: Male Female

Date of Birth/Due Date:

Parent/Guardian (person responsible for the day to day care of the child)

First Name:

Surname:

Address:

Email:

Home Phone:

Work Phone:

Mobile:

Relationship to child:

Preferred method of contact regarding enrolment updates: Phone call / TXT / Email

ENROLMENT DETAILS

0-3 years 12 hours/2 day enrolment minimum
3+ years 3 days enrolment minimum

Preferred Start Date: / /

Preferred Hours of Enrolment:

	<i>MONDAY</i>	<i>TUESDAY</i>	<i>WEDNESDAY</i>	<i>THURSDAY</i>	<i>FRIDAY</i>	<i>TOTAL</i>
<i>START TIME</i>						
<i>FINISH TIME</i>						

Comments:

How did you find out about us?	Why did you choose us?
<input type="radio"/> Friends / Family <input type="radio"/> Our teachers / Staff <input type="radio"/> Google Search <input type="radio"/> Yellow Pages	<input type="radio"/> Location <input type="radio"/> Reputation (heard positive things) <input type="radio"/> Environment - Facilities & Resources <input type="radio"/> Our Friendly Staff <input type="radio"/> Affordable / 20 Hours ECE