



ENROLMENT FORM

4 YEAR OLD PROGRAM

***Year/s required 20..... 20.....**

* You may express an interest in more than one year so that you can assess your child's readiness closer to the time, when you receive your offer of enrolment.

1. DETAILS OF YOUR CHILD

SURNAME _____ GIVEN NAME(S) _____

DATE OF BIRTH ____/____/____ (Please include a copy of your child's birth certificate) MALE / FEMALE

RESIDENTIAL ADDRESS _____

LANGUAGE/S SPOKEN AT HOME _____

2. DETAILS OF PARENTS/GUARDIAN

PARENT/GUARDIAN 1 NAME _____ PHONE (H) _____ (B) _____

PARENT/GUARDIAN 2 NAME _____ PHONE (H) _____ (B) _____

RESIDENTIAL ADDRESS _____

EMAIL _____

3. ADDITIONAL INFORMATION

Does your child have additional needs? Yes No

If yes, please specify: _____
You are encouraged to discuss your child's needs with the educator when your child's place is confirmed.

Is your child registered with a specific support service/agency? Yes No

Name of support service/agency: _____

4. PAYMENT

Colchester Park Preschool charge an enrolment application fee of \$20.00 per child. This fee is to cover administrative costs associated with the processing of a child's enrolment application and is not refundable. Payments can be made by Cheque, Internet Banking and Direct Deposit

Banking details: Colchester Park Preschool
BSB 633000 ACCOUNT 156930034

5. DECLARATION

I hereby declare that I have checked the above details and that they are true and correct.

APPLICANT'S SIGNATURE _____ DATE _____

RELATIONSHIP WITH CHILD _____

COLCHESTER PARK PRESCHOOL ENROLMENT APPLICATION ACKNOWLEDGEMENT

NAME _____

ADDRESS _____

WE ACKNOWLEDGE RECEIPT OF YOUR CHILD'S PRESCHOOL APPLICATION,
WHICH HAS BEEN PLACED ON OUR ENROLMENT WAITING LIST FOR THE:

* 4 YEAR OLD PRESCHOOL GROUP YEAR _____ (This does not guarantee a placement with the preschool)

Thank you for your consideration.

COLCHESTER PARK PRESCHOOL
COMMITTEE OF MANAGEMENT