Gundagai Community Preschool Kindergarten

2020 enrolment application form.

Please complete this form in full and return to preschool by Friday 6th September. Places will be allocated as they are returned to preschool. Preschool staff will confirm places by sending families a letter of conformation and enrolment form. Once the enrolment forms are completed and returned with the $20 enrolment fee your child's place will be secured for 2020.

CHILD'S DETAILS

Childs full Name:

Date of birth: ☐ Male ☐ Female

Home Address:

Aboriginality:

Is your child of Aboriginal or Torres Strait Islander origin? ☐ Yes ☐ No

Child's additional learning and support needs:

Does your child have any additional needs? Eg. Disability, significant difficulty in learning or behaviour ☐ Yes ☐ No NDIS number _____

If yes, please give details and attach any reports / documentation available.

Childs medical details:

Does your child have any allergies or medical conditions? ☐ Yes ☐ No

If yes, please describe: **attach any relevent documents / plans.**

Session Preference

Transition to school program for children who turn 4 before July 31st

☐ **Session 1: Monday / Wednesday**

☐ **Session 2: Tuesday / Thursday**

☐ ***I am able to be flexible and happy to be flexible if required.***

☐ ***If available – I would like to enrol my child for both sessions (4 days). This will depend on total enrolment numbers and is not gaurennteed***

Half day Session for children who are 3yrs

☐ **Session 3: Friday morning 9am-12mid day.**

Please note: If you require additional hours of care, Gundagai Preschool work in conjunction with Gundagai Out Of School Hours Care (OOSH).

Jaymi and the team at OOSH provide care for preschool aged children every afternoon until 5:30pm.

Enrolments can be made by contacting Mirrabooka : 6944 0290.

FAMILY DETAILS

1. **Parent/carer's name:**

Home address:

Phone: Mobile: Work:

Email:

Occupation/work details:

2. **Parent/carer's name:**

Home address:

Phone: Mobile: Work:

Email:

Occupation/work details:

OTHER DETAILS

Is your child currently attending another children's service?

If yes, name of service:

Next year will your child attend another childcare / preschool service in addtion to this preschool?

☐ Yes ☐ No. If yes, name of service:

What year, if known, will your child attend Kindergarten?

Name of school your child will attend Kindergarten, if known:

Names of other children residing with your child:

	Given Name	Family Name	DOB	Gender	Name of school
1					
2					
3					
4					

Do you have a Low Income Health Care Card or are you receiving an Income Support Payment?
(eg Newstart Allowance, Disability Support Pension from centrelink or the Department of Veterans Affairs. This does not include Family Tax Benifit or Carer Allowance). ☐ Yes ☐ No

I declare that the information provided in this application is, to the best of my knowledge and belief, accurate and complete. I am aware that if information I have given is false or misleading, any decision made as a result of this application may be changed.

Signature of parent/carer: Date:

OFFICE USE:
Date / Time Returned: _____ _____ Received by_____