



**WAITING LIST APPLICATION FOR KINDERGARTEN**

**The Range Community Kindergarten**

**PLEASE COMPLETE AND RETURN TO KINDERGARTEN SERVICE TOGETHER WITH A NON-REFUNDABLE FEE OF \$15.00 (incl GST) PER APPLICATION**

Date of Application:.....

**CHILD INFORMATION** *(Please Print)*

**CHILD'S NAME:**..... M / F *(Please circle)*  
*(Surname)* *(Christian Names)*

**Date of Birth:** .....

**Address:** .....

**Kindergarten Year of Attendance** (Child turns 4 by June 30): .....  
Further Information if required is available from the service.

**Preferred Program Attendance:** *(Please circle)*

**GROUP 1** Monday, Tuesday & Alternate Wednesdays      **GROUP 2** Thursdays, Friday & Alternate Wednesday

*(Fee information relative to program delivery is available on our website or at our service).*

**PARENT INFORMATION**

**Parents/Guardians**.....

**Address:** ..... **Postcode:** .....

**Telephone:** *(Home)*..... *(Work)* ..... *(Mobile)*.....

**Email:** .....

During their Kindergarten year will your child also attend another early childhood program? *(Please circle)* YES / NO  
Kindergarten      Child Care Centre      Family Day Care      Other

If your child gains a placement in our Kindergarten program, will you acknowledge this as your only access to a minimum of 15 hours of an Approved Kindergarten Program?      YES / NO

Name of other program (if answered No): .....

*(Priority of offer of placement may be given to those families who acknowledge this service as their provider of an Approved Kindergarten Program for 15hrs due to funding eligibility. Please refer to Access and Admissions policy).*

Parents Signature ..... Date .....

Payment     Cash     Cheque     Direct deposit (BSB 638-070 AC No. 14164728)

Amount:.....

**OFFICE USE ONLY**

**Date Received:** ..... **Receipt No:** ..... **Receipt Posted:** .....