



Wait List Application Form

Date.....

Required year for kindergarten program.....

Kindy Prep

Child born 1 st July 2020 to 30 th June 2021	2025	2026
Child born 1 st July 2021 to 30 th June 2022	2026	2027
Child born 1 st July 2022 to 30 th June 2023	2027	2028
Child born 1 st July 2023 to 30 th June 2024	2028	2029

Please indicate which Kindergarten group you are applying for.

Program	
Blue Group- Mon, Tue, Wed 8:50am-2:00pm	<input type="checkbox"/>
Yellow Group – Thurs, Fri 8:15am-4:00pm	<input type="checkbox"/>
Either Group	<input type="checkbox"/>

Child's Surname..... First Name.....

Date of Birth...../...../.....Address.....

Primary Parent..... Mobile Number.....

Relationship to child..... Email Address.....

Secondary Parent..... Mobile Number.....

Do you or your child identify as:

- Aboriginal? Aboriginal and Torres Strait Islander?
- Torres Strait Islander? South Sea Islander?
- Not Indigenous? Decline to answer?

Please indicate if your child has a medical condition, has/is currently undergoing assessment with NDIS or any additional needs/comments (please provide any documentation from a medical physician or NDIS reporting)

.....
.....

How did you hear about our Kindergarten Program?

.....



Terms and conditions

- I have provided correct information and agree to notify Kippa Ring Kindergarten and Preschool if my circumstances change.
- I understand that the information I have provided will be used for the purposes of being considered for a place at Kippa Ring Kindergarten and Preschool.
- I give permission for my details to be provided to C&K for the purpose of enrolment.
- I understand that Kippa Ring Kindergarten and Preschool regards my information as confidential and has policies in place to ensure the protection of this information.
- I understand that this data may be used for statistical purposes.
- I am the legal guardian of the child and have authority to provide information contained in this form.
- I acknowledge that by completing this wait list application it does not confirm a placement at a C&K centre.
- I acknowledge that I have read and understand the information above.

Parent/Guardian

Signature.....

Date:.....