

Cabarita-Mortlake Kindergarten Ass. Inc

A non-profit independent community organisation Corner of William & Denison Streets, Concord, NSW 2137 ABN 43 504 281 199

> Email: cabaritamortlakekindy@gmail.com Phone Number: 9743 4446

Waitlist Application Form

A <u>non-refundable</u> application fee of **\$20.00** is to be returned with the waitlist application. Payment can be made by direct deposit to:

Cabarita Mortlake Kindergarten Ass Inc.

BSB: 082-278

Account No: 461 224 277 (please use child's name as reference)

Child's First Name/Surname:				
Date of Birth:				
Child's Gender:	Male	Female	Unspecified	
Child's Address:				
Parent/Carer First Name/Surname:				
Mobile No:				
Email:				
Address (if different from child's):				
Parent/Carer First Name/Surname:				
Mobile No:				
Email:				
Address (if different from child's):				
Is your child enrolled in or attendin	ng another con	nmunity preschool c	or long day care service?	Yes No
If yes, please provide the name of t	the other servi	ice:		

Special Considerations:		Please tick any/all that apply	Yes	No
		Is your child Aboriginal or Torres Strait Islander?		
		Do you have a Low-Income Health Care or Pension Card? (if yes please provide a copy of the card)		
		Does your child have a diagnosed disability?		
		If yes, please detail condition:		
		NDIS Number:		
Below a	re the Priority of Acces A child at risk of serio	s levels which Cabarita Mortlake Kindergarten will follow when fillinus abuse of neglect.	ng vacancies.	,
2.	Children of Aboriginal	and/or Torres Strait Islander origin		
3.	Children from low-inc	ome families		
4.	•	before school (4 years old by end of July in year of commencement)	
5.	Children with Addition	nal Needs		
	• • • • • • • • • • • • • • • • • • • •	does <u>NOT</u> guarantee your child a position at our Preschool. If we rolment email will be sent out to you.	can offer yo	ur
	· · · · · · · · · · · · · · · · · · ·	reschool of any change to your address, contact numbers or email. Irita Mortlake Kindy, please email us to let us know to remove you f	•	_
	ead the waitlist applica n at Cabarita Mortlake	ation conditions and understand this application does not guarant Kindergarten.	ee my child	а
Signed:		Date:		