

EAST WILLOUGHBY PRESCHOOL WAITING LIST REGISTRATION

15 Warrane Rd, Willoughby, 2068. Phone (02) 9958 1582 Email address: admin@ewps.nsw.edu.au

This form is to <u>register on the waitlist</u> only.

A waitlist registration fee of \$50 is also payable at the time of completing this form.

Payment Method (please circle): Cash / Direct Debit.

Direct Debit details: Account Name: East Willoughby Preschool. BSB: 032-090. Account Number: 15-7250.

Reference: Child's Name.

EFT reference No:	Date Paid:					
PLEASE NOTE: Completion of t	his form and payment of the waitlist registration fee does not guarantee a					
position at the pre-school. Places are allocated in July/August of the preceding year and successful applicants						
are notified at that time.						
or the contract of the contrac						
Child's given names: Surname:						
Child's date of birth (DD/MM/YYYY):/ Boy/girl (please circle)						
Guardian's /Mother's name:	Guardian's /Mother's name:Guardian's/Father's name:					
Home address:						
	Postcode					
Home telephone number:	Mobile phone number:					
Email Address:						
Languages spoken at home (other	chan English):					
	onal Needs? Yes / No (please circle). See categories below, or speak to the					
Preschool Director for further assi	tance. Please tick, if applicable:					
□ Delayed development □ Ch	allenging behaviour □ Gifted □ Medical concerns					
□ Speech delay □ Other (1	lease specify)					

	Does your child have any health problems or disabilities (including allergies)? Yes / No (please circle).				
If yes	, please specify:				
Whic	h year is your child to start pre-school?				
(i.e. t	he January/February <u>after</u> they have turned 3)				
Please	e indicate your days of preferences below. Wherever possible, preferences will be accommodated.				
□ 3 D	Pays (Mon, Tues, Wed) or □ 2 days (Thurs, Fri) or □ Any				
	community-based pre-school, we rely on parent involvement. Are you prepared to join our Parent Roster to with the smooth running of the Centre? Yes / No (please circle.)				
Paren	t meetings are held approximately once per term.				
Depar	e tick the box which describes your <u>combined family income</u> . These details are a requirement of the rtment of Community Services. In some circumstances, financial assistance may be sought by a family g fees and/or the acceptance fee. This may be discussed with the Director.				
paym	g rees and/or the acceptance ree. This may be discussed with the Director.				
	Combined gross income of LESS than \$18,200				
	Combined gross income BETWEEN \$18,201 and \$37,000				
	Combined gross income BETWEEN \$37,001 and \$79,999				
	Combined gross income ABOVE \$80,000				
Are th	here any other circumstances of which you would like to make the Pre-school aware?				
Has a	sibling previously attended East Willoughby Pre-school?				
If yes	, please state name and year				

The Centre takes applications for children of preschool age, whether 3 or 4 years old at the commencement of the preschool year. We welcome in particular applications for children of Aboriginal or Torres Strait Islander origin or English Second Language (ESL) background.

The philosophy of our Centre embraces children with additional needs (ie any illness, disability, speech or behavioural issues) however, please be aware that we have certain limitations due to our physical environment in a heritage building. Assessment may be required to ensure that we can cater for all needs and care is not compromised. Please contact us to discuss further if you wish to understand our current facilities.

All final enrolment decisions are made at the Director's discretion and conditions apply. Please note that data relating to your child provided on our wait list needs to be updated prior to the Centre accepting any application and finalising formal enrolment. The Centre may reconsider or withdraw enrolment decisions on the basis of new data provided during, or following, an enrolment interview.

Signature of parent / guardian: _			
Annilo dia dia dia			
Application date:			

Thank you for your interest in East Willoughby Preschool.

OFFICIAL USE ONLY

Date Received: _	_//	
☐ Fee paid	☐ Receipt issued	□ Logged