

This form, along with the deposit, should be forwarded to: Enrolment Officer
Gray Court Pre-School
6 Gray Court, Mooroolbark, Vic 3138

4-Year-Old Kinder Enrolment Application – 2019

Children enrolling in 4-Year-Old kinder must be 4 years old before the 30th April of the year they are attending

Child's Name: _____

Date of Birth: _____ Male / Female (please circle)

Address: _____
Suburb: _____ Postcode: _____

#1: Parent/Guardian Name: _____

Relationship to Child: _____

Phone: (B/H) _____ (A/H) _____ (Mobile) _____

Email Address: _____ please tick to receive notices via email

#2: Parent/Guardian Name: _____

Relationship to Child: _____

Phone: (B/H) _____ (A/H) _____ (Mobile) _____

Email Address: _____ please tick to receive notices via email

Does your child require any additional needs (medical, intellectual, etc)? Yes / No (please circle)

If yes, please provide details or contact the Pre-School to discuss with our teacher/s:

- I hereby apply for a position for my child named above at Gray Court Pre-School in 2019 in the 4-Year-Old program.
- I enclose \$50 cash / cheque or I have made a direct deposit as an enrolment fee to be payable to Gray Court Pre-School. **(Gray Court Pre-School Direct Deposit Details: BSB 063-231 | Account 10064554 | Child's SURNAME as reference)**
- I acknowledge that the deposit is to secure my child's spot at Gray Court Pre-School; enrolment will not occur until the deposit has been paid; the deposit is non-refundable and is in addition to the term fees.
- I acknowledge the policy of **NO JAB NO PLAY**. I understand an up-to-date Medicare Immunisation History Statement is required for my child to be enrolled and that my child cannot legally attend any session of kinder until this is received.

Parent signature: _____ Date: _____

OFFICE USE ONLY

Date received: _____ Fee Enclosed: Yes / No Immunisation Statement: Yes / No

Amount received: _____ Receipt Number: _____ Waitlisted: Yes / No

Enrolment officer signature: _____ Date: _____