

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 – 2020

**\*Children enrolling in 4-Year-Old kinder must be 4 years old before the 30<sup>th</sup> 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 2020 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: \_\_\_\_\_