



# Waiting List Form

Corinda Community Kindergarten Association Inc.

4 Clewley Street, Corinda QLD 4075

[www.corindakindy.com.au](http://www.corindakindy.com.au)

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ABN: 44 102 689 883

I/We wish to place our child's name (details below) onto the Corinda Community Kindergarten waiting list. I/We understand that enrolment is not guaranteed. I/We undertake to pay a wait list fee of \$25 on the understanding that this amount is non-refundable. Corinda Community Kindergarten is a community-based, non-profit organisation run by a parent committee.

Date of Application:		Position on List:	
Child's Full Name:			
Child's Date of Birth:		<input type="checkbox"/> Male	<input type="checkbox"/> Female
Parent/Carer Name 1:		Relationship:-	
Parent/Carer Name 2:		Relationship:-	
Address:			
Suburb:		Post Code:	
Email:			
Mobile:	1:	2:	
Work Telephone:	1:	2:	
Names and ages of other children in family:			
How did you hear about Corinda Christian Kindergarten?			
<input type="checkbox"/> Family/Friend <input type="checkbox"/> Lady Gowrie Association <input type="checkbox"/> Newspaper <input type="checkbox"/> Website <input type="checkbox"/> Other:			
Are there any additional needs of which you are aware that your child may require during his/her enrolment?			
<input type="checkbox"/> Yes <input type="checkbox"/> No   Details: _____			
<small>If, for any reason, your child may need special assistance e.g. special facilities, special equipment or additional support staff, notify the centre as soon as possible so that the centre can plan for facilities/funding which can be applied for to best meet the needs of your child. This information is requested to assist the centre in long-term planning for the successful inclusion of the child with special needs. The information obtained WILL NOT be used to deny or delay enrolment of the child.</small>			
<b>Wait list fee:</b> A non-refundable \$25.00 wait list fee is required for administrative purposes. An Electronic Funds Transfer (EFT) can be completed using the following details: Account Name: Corinda Christian Kindergarten BSB: 124 028   Account Number: 21849191 Reference details: Wait list - Surname			
Parent/Carer Signature: _____		Date: _____	
Please inform us if any of the above details change. Responsibility will not be taken for locating you if you move.			

\* Enrolment year: Your child's name will be placed on our waiting list for the year that he/she is eligible to attend, as per below:

Year Born:	Enrolment Year	Year Born:	Enrolment Year:
1 July 2017 — 30 June 2018	2022	1 July 2021 --- 30 June 2022	2026
1 July 2018 — 30 June 2019	2023	1 July 2022 --- 30 June 2023	2027
1 July 2019 — 30 June 2020	2024	1 July 2023 --- 30 June 2024	2028
1 July 2020 — 30 June 2021	2025	1 July 2024 --- 30 June 2025	2029

## OFFICE USE ONLY:

Date form received: _____ / _____ / _____	Staff member taking booking: _____
Wait list fee received: _____ / _____ / _____	Receipt sent: <input type="checkbox"/> Yes <input type="checkbox"/> No   Receipt No: _____
Confirmation sent: _____ / _____ / _____	
Position accepted: _____ / _____ / _____	
Enrolment fee received: _____ / _____ / _____	Receipt sent: <input type="checkbox"/> Yes <input type="checkbox"/> No   Receipt No: _____