

1. CHILD'S DETAILS - Please print

Child's Name _____
(SURNAME - PLEASE USE CAPITALS) (Given Names)

Residential Address: _____

Date of Birth: ____/____/____ (DD/MM/YY) Male/Female: (please circle) Postcode

2. PARENT'S/GUARDIAN'S DETAILS if details same write 'as above'

Mother's Name: Mrs/Ms/Miss _____
(SURNAME—PLEASE USE CAPITALS) (First Name)

Postal Address: _____

Telephone (home) _____ (work) _____

(Mobile) _____ Email: _____

Father's Name: Mr _____
(SURNAME—PLEASE USE CAPITALS) (First Name)

Postal Address: _____

Telephone (home) _____ (work) _____

(Mobile) _____ Email: _____

3. PRESCHOOL DETAILS

Year of Entry i.e. 2010 **Preschool Preference and Alternatives**

3 y/o year of entry - **20**..... **Preference**.....

3 y/o alternatives - **Or**.....

4 y/o year of entry - **20**..... **Preference**.....

4 y/o alternatives - **Or**.....

4. ADDITIONAL DETAILS

Does your child have additional needs? Yes/No Is an aide required? Yes/No

Have other siblings attended the preference preschool? Child's Name.....Year.....

Does your child have any known allergies? Yes/No details.....

Are you a Whitehorse resident? Yes/No

Residential Address Melway Reference

Are there any additional details you wish to add to this application?
 e.g. transport, family needs, work commitments, child/family day care, language.

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5. DECLARATION

I/We have made \$20 payment via paypal or enclosed a cheque or money order made payable to WPSA, and a business sized stamped self addressed envelope or email address, to receive a reply within 5 business days. The information supplied is true and accurate. I/We understand that no guarantee is given when applying for the pre-school preference. I/we further understand the procedures of enrolment and have read the application information on this form.

Signed.....Date.....

PRESCHOOL APPLICATION FORM