

WPSA

WHITEHORSE PRE-SCHOOL ASSOCIATION

ENROLMENT TRANSFER APPLICATION

Child's Surname:.....Given Name:.....
WPSA Ref.....Date of Birth:.....
Address:.....
Telephone:.....Mobile:.....
Email Address:.....
Current Preference.....
Current Alternatives.....&.....
Year of Entry:.....Year Group:.....

NEW PRESCHOOL REQUEST

Please transfer my child's enrolment application to:

New Preschool Preference:.....
New Preschool Alternatives:.....&.....
Parent/Guardian Signature:.....Date:.....
Email address.....

Please send a stamped self-addressed envelope or provide an email address if you wish confirmation of this transfer of application.
Please allow five working days for the transfer to be processed.

Send this request to
WPSA Application's Office
PO Box 1194,
Blackburn North, 3130