

GRAYS POINT PRE-SCHOOL APPLICATION FORM FOR WAITING LIST

DATE OF APPLICATION:.....

CHILD'S FIRST NAME:.....LAST NAME:.....

DATE OF BIRTH:..... GENDER:.....

ADDRESS:.....POST CODE:.....

PHONE: Home..... Mobile.....

MOTHER'S FIRST NAME:.....LAST NAME:.....

FATHER'S FIRST NAME:.....LAST NAME:.....

Are you or your child of Aboriginal or Torres Strait Islander:.....

Are you or your child from a diverse cultural background:.....

If yes please provide details:.....

Do you or your child have a disability:.....

If yes please provide details:.....

The state government provides limited funds to assist families with low incomes. Please indicate if your gross combined family income falls within these three levels

..... < \$20 355 \$20 356 - \$27 476 \$27 477 - \$40 794

Any other relevant information.

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Where did you hear about Grays Point Preschool:

Signature of Parent (placing child's name on list):.....

Signature of Staff member taking application:.....

Ten dollar fee paid - YES / NO (circle) Date Paid:.....