



# Northside Baptist Preschool Wait list application form.

112 Sailors Bay Rd, Northbridge, NSW, 2063

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[northside.preschool@bigpond.com](mailto:northside.preschool@bigpond.com)

[northsidebaptistpreschool.com.au](http://northsidebaptistpreschool.com.au)

**Please note: applications can only be processed if the following requirements are provided:**

Completed application form with a copy of your child's birth certificate and payment of the application fee of \$35.00 (incl. GST) non-refundable (cash / cheque / EFT Account Name: Northside Baptist Preschool BSB: 062-215 Account Number: 00901235 please ensure your child's name and year for enrolment is included as the reference).

Every care and attention will be given to your child; therefore the information below is very important.

All information will be treated as confidential.

Please note that this does **NOT** guarantee your child a position at our preschool. It is your responsibility to notify the preschool of any change of address or contact telephone numbers.

## **CHILD:**

First Name:

Surname:

Sex:

Address:

Suburb:

Postcode:

Telephone:

Primary language spoken:

Date of Birth:

Cultural background:

## **PARENT /GUARDIAN 1:**

First Name:

Surname:

Sex:

Address (if different from child):

Cultural background:

Mobile number:

Email address:

Employer name:

Days/hours of work:

Occupation:

Work telephone number:

## **PARENT /GUARDIAN 2:**

First Name:

Surname:

Sex:

Address (if different from child):

Cultural background:

Mobile number:

Email address:

Employer name:

Days/hours of work:

Occupation:

Work telephone number:

**Please complete the information over the page**

***In order to comply with the National Regulations and to ensure priority of enrolment on a needs basis, you are requested to supply the following information.***

Does your child have an **additional need or allergy?** (e.g. Language delay, mobility, food/insect allergy) If yes, please state the nature of the additional need or allergy (*this is for support purposes only and will not adversely affect your child's potential placement*).

**Please tick relevant information**

- |   |  |   |
|---|--|---|
| <input type="checkbox"/> Two parent family    | <input type="checkbox"/> Home duties           | <input type="checkbox"/> Is the child or family Aboriginal or Torres Strait Islander? |
| <input type="checkbox"/> Single parent family | <input type="checkbox"/> Studying              |   |
| <input type="checkbox"/> Working full time    | <input type="checkbox"/> Is the child at risk? |   |
| <input type="checkbox"/> Working part time    |  |   |

Are you in receipt of any benefit (eg: Low income family with health care card/pension)?  
If so, please provide details:

Have any **siblings** attended the preschool? (*If so, please give names and years they attended*)

Is there anything your Teacher should be aware of in order to make preschool a positive and worthwhile experience for your family?

Signature:

Date:

*Thank you for your time and interest in Northside Baptist Preschool*

<b>OFFICE USE ONLY</b>			
<b>Date form received:</b>	<b>Receipt No:</b>		<b>Eligible for entry in:</b>
	<b>Circle Answer</b>	<b>Date</b>	<b>Comments</b>
Parent Contacted	Y / N		
Position Accepted	Y / N		
Enrolment Forms sent	Y / N		
Enrolment Forms returned	Y / N		
Holding Deposit received	Y / N		
Receipt issued	Y / N		
Toured centre	Y / N		