

## FIRST STEPS PREKINDY WAITIIST

## *This form is intended for our waitlisted families an NOT a registration to our program We operate on a first come, first serve basis.*

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Child's full name:		Date of birth:	Date of birth:		
Child's CRN (if known) :					
Primary Care Giver's name:		Additional Carer's name:			
Primary Care Giver's CRN :		Additional Carer's CRN :			
Primary Care Giver's DOB :		Additional Carer's DOB			
Home phone:		Home phone:	Home phone:		
Mobile phone:		Mobile phone:	Mobile phone:		
Email:		Email:			
Are you planning on cla	iming the childcare subs	idy? YES / NO			
Who will be the primary caregiver?					
MONDAY AM 9AM-12 \$49*beforeCCS	TUESDAY ALL DAY 9AM-2:00PM	WEDNESDAY AM 9AM-12 \$49*beforeCCS	THURSDAY	FRIDAY ALL DAY 9AM-2:00PM	
MONDAY ALL DAY 9AM-2:00PM		WEDNESDAY ALL DAY 9AM-2:00PM			
This program focuses on social development and independence as well as a range of "school readiness skills" such as phonological awareness, prewriting development, and early numeracy and literacy development. In this program children will be provided with a comprehensive portfolio, transition report and certificate. *All childcare subsidies families are enrolled into the program for 48weeks unless notified otherwise. All other families are on a term by term arrangement. * A minimum of 5 children will need to be enrolled in order for the class to operate					
I wish for my child to be added to the waitlist and understand that should a place be offered I will need to resubmit a registration form within the 48hrs to secure the placement.		Our waitlist form allows you the opportunity to let us know hen you would like to be offered a placement. Please write below the date you wish to join should the space become available.			
Signature of applicant:					
I understand that should a spot become available I will be required to pay a \$50 Non Refundable Deposit to secure the placement		Please add here when yo spot in our program.	Please add here when you would like to no longer be contacted regarding a spot in our program.		
Signature of applicant :					
<ul> <li>By sending through this form 1 acknowledge that I would like my child to be enrolled at First Steps PreKindy and therefore be added to the waitlist.</li> <li>All of the information that I have provided is accurate and First Steps PreKindy will be notified of any changes immediately.</li> </ul>					
Signature of applicant:		Date			
OFFICE USE ONLY:					