



Finalising your Enrolment

PLEASE COMPLETE THIS FORM TO ACCEPT YOUR CHILD'S PLACE FOR NEXT YEAR AND RETURN TO THE KINDERGARTEN BY **MONDAY 17th JUNE** BY EITHER POSTING TO 1A MYRTLE RD HAMPTON 3188 OR VIA EMAIL

3 Year Old Email: en_officer_3yo@hamptoncommunitykinder.org.au

4 Year Old Email: en_officer_4yo@hamptoncommunitykinder.org.au

***If you have an application reference number provided by Bayside City Council please record here _____**

Once your child's place has been processed, you will receive a confirmation email confirming which group your child has been allocated to. This email will also outline the details for our AGM (Annual General Meeting) to be held on November 23th 2019 to which you are required to attend in order to receive more information about the kinder program for next year.

CHILD INFORMATION

Family Name: _____

Date of Birth: ___ / ___ / ___

Given Name/s : _____

Preferred Name: _____

Gender:

- Male
- Female
- Other _____

Language Spoken at Home: _____

***Please note that the kindergarten requires a copy of your child's up-to-date immunisation records and birth certificate to complete the enrolment process.**

PRIMARY FAMILY HOME ADDRESS

No. & Street: _____

Suburb: _____ State: _____ Postcode: _____

Contact Name: _____

Contact Number: _____

Email: _____

Parent/Guardian Signature: _____

FOUR YEAR OLD GROUP PREFERENCE

Please select one option if your child will be attending 4 Year Old Kinder in 2019.
Please note that groups will be allocated via the order the forms are received.

- | | | | |
|--------------------------|----------------------|-------------------------------|---|
| <input type="checkbox"/> | Wombat Group | Wednesday
Friday | 8:30am – 4:00pm
8:30am – 4:00pm |
| <input type="checkbox"/> | Echidna Group | Monday
Tuesday
Thursday | 8:30am – 4:00pm
12:15pm – 4:00pm
12:15pm – 4:00pm |
| <input type="checkbox"/> | No Preference | | |

PAYMENT

To secure your child’s place, a non-refundable deposit of \$250 needs to be paid (eligible concession holders are exempt) via direct deposit by **Monday 15th July** into the bank details provided below:

Bank: Bendigo Bank

BSB: 633 000

Payment Ref: Child’s Family Name and initial

Account Name: Hampton Community Kinder

Account Number: 158395541