



Tamworth Montessori Preschool

Preparing our children for life

Waiting List Application Form

Child's full name: _____

Child's Date of Birth: ____/____/____

Child's Sex: _____

Is your Child? Aboriginal Torres Strait Islander Neither

Is your Child on either a Health Care Card or Pension Card? Yes / No

Preferred starting date: ____/____/____

Preferred Two Days Monday Tuesday Wednesday Thursday Friday
 Yes, I would like to take any two days available
 No, I require the days as indicated above

Parent Details	Parent 1	Parent 2
Full Name		
Address		
Relationship to child		
Phone number/s	(H) (M) (W)	(H) (M) (W)
Email Address		

Other children in the family and their ages:

Languages spoken at home:

Does your child speak clearly? Yes / No Is your Child toilet trained? Yes / No

What size shirt does your child need? Small Medium Large

What is your child's preferred colour? Pink Orange Red Mauve

Waiting List Application Fee of \$75.00 is enclosed. This Waiting List Application Fee includes a hat, water bottle and shirt, these will be given to your child/ren during their first week. The Waiting List Application Fee is non-refundable.

Payment Options:

We only take cheque and correct cash at the Preschool. Otherwise Electronic Funds Transfer: BSB 012-830, Account Number 2083-81439, Account Name Tamworth Montessori Association Inc.

How did you find out about us?	
Notes	

I have read and understood the information in this Waiting List Application Form.			
I understand completion of the Waiting List Application does not guarantee an enrolment offer at Preschool.			
Parent Name		Date	___/___/___
Parent Signature			

Office Use Only			
Amount		Date Paid	
Receipt Number if Cash		Preschool Manager's Signature	