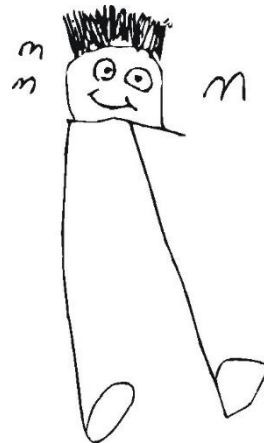


# Birubi Point Community Pre-School Inc.

P.O. Box 14. Anna Bay, 2316  
Phone: (02) 4982 1899 Mob: 0419 979 304  
E-mail: birubipreschool@bigpond.com  
Monday to Friday



## Application for Waiting List

Child's Name.....

Date of Birth: .....

Parent's Name.....

Address.....

.....

Phone Number..... (home) ..... (work)

..... (mob)

E-mail Address.....

Do you hold a current Health Care Concession Card? Yes / No

Is your child of Aboriginal or Torres Strait Islander descent? Yes / No

Is your child currently enrolled at another centre? Yes / No

If yes, on which day/days.....

Does your child experience any language/speech difficulties, physical problems or health related difficulties? Yes / No

If yes, please describe.....

***Enrolments cannot be accepted without Birth Certificate and Immunisation History Statement (unimmunised children can not be enrolled).***

Number of days required per week .....

Preferred days of attendance (please circle)

Monday

Tuesday

Wednesday

Thursday

Friday

Signature.....

Date.....

**Please inform the pre-school of any changes in your circumstances as this could save any future inconvenience or misunderstanding.**