

# Kid City Kindergarten

A special place where early childhood is filled with fun,  
learning and LOVE

## Waiting List Application



20\_\_\_\_ Wombat

20\_\_\_\_ Emu

20\_\_\_\_ Big School

Date of Visit: \_\_\_\_/\_\_\_\_/\_\_\_\_

### Child Details

Full Name: \_\_\_\_\_

Child's DOB: \_\_\_\_/\_\_\_\_/\_\_\_\_

Child's Gender:

Male

Female

Month & Year Child Turns 3: \_\_\_\_/\_\_\_\_

Health Requirements: \_\_\_\_\_

Dietary Requirements: \_\_\_\_\_

Special Needs: \_\_\_\_\_

Cultural Background / Religious Beliefs: \_\_\_\_\_

Languages spoken at home: \_\_\_\_\_

Centrelink CRN: \_\_\_\_\_

### Mother's Details

Full Name: \_\_\_\_\_ DOB: \_\_\_\_/\_\_\_\_/\_\_\_\_

Mobile Telephone #: \_\_\_\_\_

Residential Telephone #: \_\_\_\_\_

Email address: \_\_\_\_\_

Centrelink CRN: \_\_\_\_\_

### Father's Details

Full Name: \_\_\_\_\_ DOB: \_\_\_\_/\_\_\_\_/\_\_\_\_

Mobile Telephone #: \_\_\_\_\_

Residential Telephone #: \_\_\_\_\_

Email address: \_\_\_\_\_

Centrelink CRN: \_\_\_\_\_

### Priority of Access

- \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
- |            |  |
|------------|--|
| Priority 1 | A child at risk of serious abuse or neglect  |
| Priority 2 | A child of a single parent who satisfies, or of parents who both satisfy the work / training /study test under Section 14 of the Family Assistance Act |
| Priority 3 | Sibling of a current child attending Kid City _____  |

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**Priority 4**

**Any other child**