

Dear Parent,

Thank you for your enquiry today regarding child care for your child with **Edrington Park Child Care Centre**. We would love to have you join us.

Please read the information below to understand our Waiting List Procedure.

Waiting List

If the demand for child care exceeds supply, as it often does & we are unable to place your child at the time of enquiry, the child will be designated the next position on our Waiting List.

A completed Waiting List Application Form & payment of a **non-refundable** \$50 administration fee is required before being placed on the Waiting List. Positions are allocated according to availability which is dependent on age of child, days sought & whether there are siblings also requiring care. If a position is offered & a parent declines the Waiting List Application is re-dated & placed at the end of the list.

Enrolment Procedure

Parents are encouraged to visit the Centre to meet the staff & see how we operate at any time. To be officially enrolled however a position must be available. A Waiting List Application Form must be completed if there are no current vacancies. If you are offered a position a comprehensive confidential Enrolment Form is then completed & signed by parents, as an agreement of care & confirmation of a position. On confirmation of enrolment you will receive a login to Edrington Park Child Care Centre's Website where you will have access to all Centre information.

We hope to see you & your child again soon.

Edrington Park Child Care Centre Management

Date: _____

WAITING LIST APPLICATION FORM

Child's Name:		D.O.B	
Room Required:			

Days required: Monday Tuesday Wednesday
 Thursday Friday

Parents Name:		D.O.B.	
Home Address:			
Email Address:			
Contact Numbers:	Mobile:	Home:	Work:

Does your child currently attend another Child Care Centre? (Please circle)	YES	NO
Does your child have any additional needs in relation to development or diet? If so, briefly explain below:		
Does your child receive Inclusion Support Funding? (Please circle)	YES	NO

Administration Fee Payment

Non Refundable Administration Fee: \$50.00 per child

Number of Child/ren: ___ x \$50.00 = **Total:** \$ _____

Payment Method (Please tick)

Eftpos Credit Card Cash

Credit Card Number:

Expiry Date: / CCV (3 digit code):

Name on Card: _____

Signature on Card: _____