

## TWEED HEADS COMMUNITY PRESCHOOL INC.

# WAITING LIST APPLICATION

Please complete waiting list application and return to the preschool or email to [thpreschool@bigpond.com](mailto:thpreschool@bigpond.com) or post to PO Box 6187, Tweed Heads South NSW 2486

CHILD'S DETAILS				
First Name		Surname		
Date of Birth	/	/	Sex (please circle)	Male / Female
FAMILY CONTACT DETAILS				
First Name		Surname		
Relationship to Child		Suburb		
Street Address				
Post Code	Tel. ( )		Mobile	
SECONDARY CONTACT DETAILS				
First Name		Surname		
Relationship to Child		Suburb		
Street Address				
Post Code	Tel. ( )		Mobile	
ATTENDANCE PREFERENCES AND INCOME DETAILS				
What date would you prefer your child commence their attendance?				
What days would you prefer (please circle):    Monday        Tuesday        Wednesday        Thursday        Friday				
Days will be determined by availability.				
<b>I understand that I am responsible for keeping the contact information on this waitlist form up to date. I understand that submitting this waitlist application is not a guarantee of a placement.</b>				
Signature				
Print Name		Date        /        /		