



**Waiting List - Child Care or Kindergarten Place**

Date.....

Name/s of Parents/Guardians.....

Address.....  
 .....

Telephone .....(Home)  
 .....(Work)  
 .....(Mobile)

Email.....

Details	Child 1	Child 2	Child 3
Name Of Child			
Date Of Birth of Child			
Age At Commencement			

Preferred Starting Date.....Number of Days Wanted.....

Preferred Days (Circle) Monday Tuesday Wednesday Thursday Friday

A \$25 Wait List Fee is payable when lodging this form. This fee is non-refundable but will be recognised on your account upon enrolment at Clearview Early Learning & Kindergarten.

We recommend that you complete and lodge this form as soon as possible. We will contact you closer to your preferred starting date or as soon as a place becomes available.

Please note that acceptance of the form does not constitute an offer of place.

\$25.00 Received On.....payment by.....

To find out more about us, please visit our website: [www.clearviewkindy.com.au](http://www.clearviewkindy.com.au)

How Did You Hear About Us? (Circle) Friend Family Internet Google Search Yellow Pages  
 Mychild.com.au Live Nearby Other