



Lady Gowrie^{QLD}
Community
Kindergartens

Pioneer Community Kindergarten

Waiting List Application



Child's Name: _____

Date of Birth: _____

Male / Female

Year of entry (child must be four by 30th June): _____

Parent/Guardian 1: _____

Occupation: _____

Parent/Guardian 2: _____

Occupation: _____

Address for correspondence: _____

Parent/Guardian PH (1): _____

Parent/Guardian PH (2): _____

Email: _____

Does your child have any known learning difficulties, additional needs or dietary requirements? YES / NO
Please specify: _____

How did you hear about our Centre?

Word of mouth

Website

Face book

Other _____

Older sibling attended Name: _____ Year: _____

I wish to place my child on the Kindergarten waiting list as indicated above.

I agree to pay the administration fee either by cash, cheque or direct deposit.

(Please provide a copy of the receipt if you have paid by direct deposit.)

2020 - \$10.00

2023 - \$10.00

2021 - \$10.00

2024 - \$10.00

2022 - \$10.00

Family application fee
(two or more applications at the same time - \$15.00)

I am interested in: **BEFORE** Kindergarten Care **AFTER** Kindergarten Care

Account Details:

Pioneer Community Preschool & Kindergarten

Bank of Queensland

BSB: 124 001

Account No.: 100 084 644

Parent/Guardian Statement
*I understand this fee is non-refundable.
I agree to notify the centre of any change/s.*

Signed: _____

Date: _____

Pioneer Community Kindergarten

PH: 07 4942 3340 Email: admin@pioneerkindy.org.au

10 High Street NORTH MACKAY QLD 4740

OFFICE USE: Date received: _____

Receipt Number: _____