



RICHMOND PRESCHOOL KINDERGARTEN Assoc. Inc

110 March Street, Richmond
PO Box 149, Richmond 2753

Phone: (02) 4578 2647
A.B.N. 66 612 684 640

e-mail: admin@richmondpreschool.org.au

www.richmondpreschool.org.au

REGISTRATION FORM / WAITING LIST

Child's Name

Date of Birth.....

Parents'/Carers' Names

Address

Phone (Home)..... (BH)..... Mobile.....

Email address.....

Year of Attending PreschoolNo of days required

Preferred day(s)

Year you expect your child to start primary school.....

Do you believe you may qualify for a fee subsidy?.....

DOES YOUR CHILD HAVE ANY ADDITIONAL NEEDS?

e.g.. Speech problems, behavioural problems, ADD / ADHD, developmental delay, toileting, etc.) YES / NO

DETAILS.....

Are there any court orders / custody concerns we need to be aware of?.....

Cultural Background.....Language spoken by child at home.....

HOW DID YOU HEAR ABOUT RICHMOND PRESCHOOL?.....

An enrolment fee is charged on acceptance of this position. This is a non-refundable fee. I understand this form does not guarantee my child a position. For further information please visit our website. www.richmondpreschool.org.au

Signed.....Date.....

OFFICE USE ONLY

Receipt No..... Date.....