



MONTESSORI
CHILDRENS CENTRE
MCLAREN VALE

Office use only

Date reg. _____
App Fee paid Y / N
Cash / EFT / INT

WAITING LIST APPLICATION

Please complete this form and return to the Centre as soon as possible to ensure your child is placed on our Waiting List. A **\$50.00** non refundable Application Fee made out to the Centre must accompany this form.

Child's Name (*last*) _____ (*first*) _____ Male / Female

Child's Date of Birth _____

Parents' Names Parent 1 _____ Parent 2 _____

Parents' Dates of Birth Parent 1 _____ Parent 2 _____

Contact address _____ Postcode _____

Telephone (*Home*) _____ (*Work*) _____

Email _____ Mobile _____

Please tick preferred choice/s

Transition

8.30am - 12.00noon Monday Tuesday Wednesday Thursday Friday

Pre-School

8.30am - 3.30pm Monday Tuesday Wednesday Thursday Friday

Before Session Program 8.00 - 8.30am

After Session Program 3.30 - 4.30pm

When my child is eligible to attend Kindergarten, I intend to use:-

Montessori as a Kindy. both Montessori and the local Kindy. the local Kindy only.

When would you like your child to begin? _____

Have you had or do you currently have other children at our Centre? _____

Are there any special considerations or special needs for your child of which we should be aware? _____

How did you hear about our Centre? _____

Thank you for your application. We will now enter your child's name on our Waiting List and contact you again closer to your preferred starting date. Please note that while we endeavour to accommodate all children positions are not guaranteed as placements depend on spaces available. Your \$50.00 application fee is non-refundable and covers administration costs except in instances where the program is not available. Payment can either be made into the Montessori Bank Account (BSB: 065 169 Account: 1011 6421) or by cash or credit card.