

## Kindergarten Waiting List Application

Cannon Hill Community Kindergarten

**Child's first name** \_\_\_\_\_ **Last name** \_\_\_\_\_

Date of Birth \_\_\_\_\_ Male / Female \_\_\_\_\_

Child's address \_\_\_\_\_  
 \_\_\_\_\_

**Parent/Carer 1 - Name** \_\_\_\_\_

Mobile Number \_\_\_\_\_ Email \_\_\_\_\_

**Parent/Carer 2 - Name** \_\_\_\_\_

Mobile Number \_\_\_\_\_ Email \_\_\_\_\_

How did you hear about us? \_\_\_\_\_

A **\$20 Non-Refundable Waiting List fee** is required with all Waiting List applications. The fee can be paid via cash or EFT in person or Direct Deposit to the bank account below with your child's name as the reference, emailing confirmation to **admin@cannonhillkindy.com.au**

**Account Name:** Cannon Hill Kindergarten **BSB:** 064-142 **Account Number:** 00902 948

Child's birth date	Year to attend Kindy
1 July 2020 – 30 June 2021	2025
1 July 2021 – 30 June 2022	2026
1 July 2022 – 30 June 2023	2027
1 July 2023 – 30 June 2024	2028
1 July 2024 – 30 June 2025	2029

Your child must be 4 years old by June 30 of their Kindy year to participate in a Queensland Government-subsidised Approved Kindergarten program.

**Please waitlist my child to attend  
Cannon Hill Kindy in the year**

\_\_\_\_\_

**Our program preference is:**  
*(tick either or both)*

**Kindy Purple:** 8.45am – 2.45pm  
Monday, Tuesday and Wednesday

**Kindy Green:** 8.00am – 4.00pm  
Thursday and Friday

**Parent/Carer signature:**.....**Date:**.....

<b>Office Use:</b> Receipt Number:.....	Staff Signature:.....
Date Form Received:.....	Date Payment Received:.....