

3-Year-Old Enrolment Application Form

Enrolment Year: _____

Child's Information	
Family name:	Sex: Male <input type="checkbox"/> Female <input type="checkbox"/>
Given names:	Usually called:
Date of birth:	Copy of birth certificate attached: Yes <input type="checkbox"/>
Country of birth:	Religion (optional):
Home address:	
Suburb:	Postcode:
Languages spoken at home:	
Is the child aboriginal or Torres Strait Islander? <input type="checkbox"/> No, not Aboriginal or Torres Strait Islander <input type="checkbox"/> Yes, Aboriginal <input type="checkbox"/> Yes, Aboriginal and Torres Strait Islander <input type="checkbox"/> Yes, Torres Strait Islander	
Family Information	
Parent/Guardian Names:	
Phone (H):	Phone (W):
Mobile:	Email:
Address – as per child or:	
English interpreter required for parent? Yes <input type="checkbox"/> No <input type="checkbox"/>	Language:
Occupation:	Does the child live with you? Yes <input type="checkbox"/> No <input type="checkbox"/>
Have siblings previously attended AELC in the last 5 years? Yes <input type="checkbox"/> No <input type="checkbox"/> Please list name/s and year/s first enrolled:	
Do you live, work or study in the City of Stonnington? Yes <input type="checkbox"/> No <input type="checkbox"/> If yes , please state name and Address of work/study (if in Stonnington)	
Additional Information	
Does your child have any special needs/allergies/other medical conditions? Yes <input type="checkbox"/> No <input type="checkbox"/> If yes , please provide details:	
Is your child's immunisation up to date? Yes <input type="checkbox"/> No <input type="checkbox"/> (you will be required to provide evidence of same)	
Are you able to take on a committee role? Yes <input type="checkbox"/> No <input type="checkbox"/>	
How did you hear about AELC?	

Please notify AELC to any changes of the above information so that we are able to contact you. You can do this by contacting the Enrolment Officer via email at enrolments@armadaleelc.vic.edu.au.

Please note:

- Children must turn three no later than 30th April in the year commencing pre-school.
- Children turning three between the start of the year and the 30th of April must either attend kindergarten with a parent/guardian or wait until their 3rd birthday.

Please indicate the group in which you wish your child to be enrolled:

Koala Group

2 sessions - Monday and Thursday, 1 - 4pm

Kangaroo Group

3 sessions - Monday, 9am – 12pm
- Tuesday and Friday, 1 - 4pm

\$30.00 Fee for 3-year-old Application provided (Bank transfer, cheque or money order only – NO CASH). BSB 083_298. Account No. 829 698 033.

Signature: _____ Date of Application: _____

- **DEADLINES: To receive preference, Siblings and Stonnington residents/workers/students MUST submit their applications by the end of Term 1 in the year preceding attendance. LATE APPLICATIONS RECEIVE NO PREFERENCE AND JOIN THE BOTTOM OF THE WAITING LIST IN ORDER OF RECEIPT.**
- Places CANNOT be guaranteed and are allocated by working through the waiting list until all spots are filled.
- The 3-year-old waiting list order is set as follows (for applications received by their deadline): Children repeating the Centre's 3-year-old program; Children who have had siblings previously attend the Centre (in order of receipt); City of Stonnington residents/workers/students (in order of receipt); all other applications (in order of receipt).
- Enrolments are accepted from **18 months** before the year of commencement
- Notification of an offer will take place from late June in the year prior to entry.
- No confirmation of receipt of this application will be sent unless requested, with a stamped self-addressed envelope.
- Please mail your application form and fee to: **Armadale Early Learning Centre, 3 Fulton St, Armadale Vic, 3143, Attention: Enrolments Officer**

Office Use Only: Date of receipt (with fee) _____