

WAITING LIST APPLICATION FORM

- Please complete and return this form to **Adelaide Early Childhood Centre, 28 Colombo Street, Newtown, Wellington. Ph/Fax: 04 389 8238**
- Applications for an immediate place will be endeavoured to be fulfilled as soon as possible. They will be held for 3 months, at which time please contact Adelaide Early Childhood Centre if you wish to remain on the waiting list
- Applications for a place some time in the future will be advised regarding a possible starting date. They will be held until the date specified.
- Please keep in regular contact with Adelaide Early Childhood Centre and advise if a place is no longer required.

DETAILS:

Name of Child: _____

Date of Birth: ____/____/____

Male

Female

Contact Parent/Guardian

Name: _____ Relationship to Child

Address: _____

Home Phone: _____ Cell Phone:

Business Phone: _____ Email:

I would like my child to commence attendance on: _____

Session	Mon	Tue	Wed	Thu	Fri
7.45am – 3.15pm					
7.45am – 5.25pm					

Comment: _____

Signature: _____

Date: _____

OFFICE USE:

Date received Back:	Enrolment	Start
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APPLICATION UPDATE INFORMATION

Date Contact Made	Communication