

3 YEAR OLD KINDERGARTEN – EXPRESSION OF INTEREST
3yoenrolments@mentonepreschool.com.au

Application for 3 year old kindergarten for the year 20__

Three year old kindergarten session times are:

Terms 1-4 Tuesdays 8.30am-12noon

Thursday 2pm-4.30pm

CHILD'S NAME: _____ D.O.B.: _____

PARENT 1 NAME: _____ PARENT 2 NAME: _____

ADDRESS: _____ VIC _____

Home Phone _____ ZONE NO. (1-4): refer map _____

Mobile/Work Phone (Parent 1): _____

Mobile/Work Phone (Parent 2): _____

Email Address (Parent 1) _____

Email Address (Parent 2) _____

Has a sibling of the child previously attended Mentone Pre-School? **YES / NO**

If yes, please provide the siblings name and year of attendance: _____

How did you hear about us?

- | | | | |
|-------------------------------|--------------------------|-------------------------------|-------|
| Google | <input type="checkbox"/> | Flyer (location) | _____ |
| Facebook | <input type="checkbox"/> | Event (please specify) | _____ |
| Word of Mouth (name) | _____ | Signage (location) | _____ |
| Other (please specify) | _____ | | |

APPLICATION CHECKLIST

\$10 Application Fee payment made as (tick as appropriate):

Bank Transfer (confirmation receipt required) **Please reference the code 3YOSURNAME**

ACC Name: Mentone Pre School Association

BSB: 633 000

Acc No.:151 937 232

EFTPOS Payment (available in the office)

Cash / Money Order

Childs Birth Certificate

Copy of Proof of Address

PARENT SIGNATURE: _____