

# Waterford Preschool - Waverley College

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## Waiting List Application (for a child over 2 years of age)

### Child Information:

Christian Name:.....Surname:.....

D.O.B: ...../...../.....

Male

Female

### Residential Address:

.....  
.....State.....Postcode:.....

### Preferred days of attendance (Please circle)

Monday

Tuesday

Wednesday

Thursday

Friday

Group sessions are currently Monday-Wednesday and Thursday - Friday. Priority of access is given to children in the year before school and those closest to school entry. Please tick the boxes that apply.

Child with additional needs/disability)  Please describe .....

Child from a linguistically or culturally diverse background

Staff member or sibling of a child previously enrolled at Waverley College

Child with Aboriginal or Torres Strait Islander Background

Child is in the year before school (That is turning 4 prior to the 31<sup>st</sup> of July)

Please note the completion of this form does not guarantee a position at the preschool. Only successful applicants will be contacted.

### Applicant:

Parent/guardian: Mother  Father  Other  (Please indicate)

Title:.....First Name: ..... Surname: .....

Email Address: .....

Home Phone: ..... Mobile:.....

Signature:.....Date:.....