

BEVERLY HILLS *Montessori* CHRISTIAN

LONG DAY CARE

32 Chamberlain Street
NARWEE NSW 2209
PH: 9533-2781

APPLICATION FOR ENROLMENT for 0-3 YEARS OF AGE

FULL NAME OF CHILD _____
DATE OF BIRTH _____ MALE OR FEMALE _____
CHILD'S RELIGION _____
ADDRESS _____ P/CODE _____
HOW MANY CHILDREN IN FAMILY? _____ AGES & SEX _____
MOTHER/PARENT 1 NAME _____ OCCUPATION _____
COMPANY _____ MOTHERS RELIGION _____
PHONE NUMBERS: HOME _____ WORK _____
MOBILE _____ OTHER _____
FATHER/PARENT 2 NAME _____ OCCUPATION _____
COMPANY _____ FATHERS RELIGION _____
PHONE NUMBERS: HOME _____ WORK _____
MOBILE _____ OTHER _____

* **SCHOOL FEES** : *Payable 4 weeks in advance* (Please see Prospectus for fee amounts)

* **PREFERENCE**: Place a cross in the box next to the days that you would like permanent daily care for your child
(There is a minimum of 2 days per week):

MONDAY TUESDAY WEDNESDAY THURSDAY FRIDAY

Every effort will be made to provide your above selection, but no guarantee is given.

Ideally, when would you like your child to commence: _____

Does your child have any allergies, medical conditions, etc that the centre should be aware of?

Yes / No (**Please circle**) Please provide details on the back of this form.

School daily opening hours = **7.30am to 5.30pm**. What **time** would you anticipate:

1. Dropping off your child _____ 2. Picking up your child _____

Why have you chosen this centre for your child? (e.g. Christian? Montessori? Other?)

* **ENROLMENT POLICY:**

I understand a Listing Fee amount of \$100.00 is to be paid to Beverly Hills Montessori Christian LDC to register my child's name on a waiting list. If a position for my child is offered, I understand that the \$100.00 goes towards my first fee payment. I understand that this Listing Fee is not refundable and that no guarantee is given for placement. Once enrolment has been accepted and fees paid, and If I should wish to withdraw my child, I understand that 4 weeks payable notice is required in writing.

I enclose my cheque for \$100.00 to cover the Listing Fee and have read and agree to the school Prospectus and above enrolment policy.

SIGNATURE _____ DATE _____
(Parent)

Cheques to be made payable to: Beverly Hills Montessori Christian Pre-school & Long Day Care
Or

Bank transfer to: Beverly Hills Montessori BSB: 062 458 Account number: 1020 3892
Reference child's last name on transaction

Please send to: **Beverly Hills Montessori Christian Pre-school & Long Day Care**
32 Chamberlain Street
NARWEE 2209