



## Moree ELC Waitlist

**Note: A place on our waiting list does not guarantee a position at the service.**

Child's Name*:	<input type="text"/>	First Name	<input type="text"/>	Surname	<input type="text"/>
Gender*:	<input type="checkbox"/> M	<input type="checkbox"/> F	<input type="checkbox"/> TBC	DOB/Child Due Date:	<input type="text"/>
Preferred Day(s):	<input type="checkbox"/> Monday <input type="checkbox"/> Tuesday <input type="checkbox"/> Wednesday <input type="checkbox"/> Thursday <input type="checkbox"/> Friday				
Are you flexible with the days selected above?:	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Preferred Start Date:	<input type="text"/>	
Parent/Carer's Name*:	<input type="text"/>	Parent/Carer's Name 2:	<input type="text"/>		
Contact No.*:	<input type="text"/>	Contact No.:	<input type="text"/>		
Address:	<input type="text"/>				
Email Address:	<input type="text"/>				
Does your child have a disability, speech delay, additional need (i.e. behavioural concerns) ?	Does your child speak English? What is the main language spoken at home? <input type="text"/>				
Any children in your family who have/or are attending our service? Name(s): Enter Name(s)	Is your child of Aboriginal/Torres Strait Islander descent and recognised as such by the community? <input type="text"/>				
Any further information which may be of assistance:	<input type="text"/>				
Children who are not vaccinated or have not provided vaccination records may be excluded in the event of a vaccine preventable disease. Is your child's immunisation up to date? <input type="text"/>					

*Please notify us immediately if any of the above information changes in any way. (Failure to do so may result in loss of position on waiting list). We have a firm commitment to protecting the privacy of our clients. Personal information collected on this form is for the purpose of contact and establishing priority of access only.*