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## Waiting List Application Form

(Please note that lodgement of this form does not guarantee a position)

- 2020 (children born 1<sup>st</sup> July 2015 – 30<sup>th</sup> June 2016)
- 2021 (children born 1<sup>st</sup> July 2016 – 30<sup>th</sup> June 2017)
- 2022 (children born 1<sup>st</sup> July 2017 – 30<sup>th</sup> June 2018)
- 2023 (children born 1<sup>st</sup> July 2018 – 30<sup>th</sup> June 2019)



Childs Name: ..... Date of Birth: .....

Parent / Carer Names: .....

Address: .....

Phone: ..... Email: .....

- My Child / Family has a Health Care Card.** Funding Support is available for Children or Families with a Health Care Card/Pension Card / Concession Card.
- My child identifies as Aboriginal / Torres Strait Islander / Australian South Sea Islander.** Funding support is available for children who identify with these groups.
- My child has special needs.** Please advise is your child is seeing a specialist, paediatrician or attending Emerald ECDP. Funding for support staff for a special needs child is available if early notification is given to the Director.
- I have paid the \$5 Waiting List Fee.** This fee must accompany this application. Preference for groups is offered according to date of receipt of completed form and fee. The waiting list fee can be paid by direct deposit, our banking details are: *Suncorp BSB 484-799 Account No 084 306 546. Please include your child's name as the transaction reference.*

Please notify our office if any of your contact details change.

Signed: ..... Date: .....

Office Use Only			
Received By:.....	Date:.....	Receipt No:.....	Position on Waiting List:.....