



## Waiting List Application

Child's Name: .....

Child's Age & Date of Birth: .....

Toilet Trained: YES NO

Year to commence School: .....

Mother's Name: .....

Father's Name: .....

Address: .....

Phone Number: .....

Email Address: .....

How many days required? .....

Please circle days of choice: M T W T F Any

Are you a 1 or 2 parent Household: .....

Parent 1: employed  seeking employment  studying

(Parent Registered for Centrelink Payments)

Parent 2: employed  seeking employment  studying

Any other circumstances: .....

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

How did you hear about Cuddlepie, Please tick:

Word of mouth..... Website..... Yellow pages.....

Previous children attended..... Other.....

***To maintain your position on the waiting list please contact  
The centre every 3 months.***

**Office only:**

***Fee and Deposit information explained***

**Date received:** ..... **Signature:** .....

**Room:**..... **AgeGroup:**..... **Priority:**.....