



Cnr Birriley & Coomea Sts
P.O. Box 2382
Bomaderry NSW 2541
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Waiting List Application 2019

Date: ____/____/____

Child/rens Name: 1) Master/Miss _____

Date of Birth: ____/____/____

2) Master/Miss _____

Date of Birth: ____/____/____

Address: _____

Email: _____

Parent/Carer Information:

Parent/Carer 1: Dr Mr Mrs Ms Miss

Parent/Carer 2: Dr Mr Mrs Ms Miss

Name: _____

Name: _____

Home: _____

Home: _____

Work: _____

Work: _____

Mobile: _____

Mobile: _____

Additional Information Required: Please tick and add additional information if required

- Child with additional needs
- Child from a non-English speaking background
- Child from an Aboriginal or Torres Strait Islander Background
- Affordability assistance required (*families must hold a current low income Family Health Care Card*)
- Full Fees 4yr olds on or before 31st July 2019** \$31.00 per day up to 2 days of attendance
\$58.00 for 3rd day of attendance
- Full Fees 3yr olds on or before 31st July 2019** \$58.00 per day up to 3 days of attendance
- Level 1 Fees 3yr & 4yr old equity** \$15.00 per day up to 2 days of attendance
\$28.00 for 3rd day of attendance

Do you have any siblings at NAC? Yes Year _____ No

Please number your preference (1-2) that would best suit your child and your family's needs in 2019.

Bomaderry Community Preschool - Current Site Bomaderry Community Preschool - NAC Campus

Number of consecutive days requested: Two Three

Days Required: Mon Tues Wed Thurs Fri

Parent/Guardian Signature: _____

Office Use Only:

Contacted: ____/____/____

Comments: _____

Commencement Date: ____/____/____ Staff Signature: _____