

Unley Early Learning Centre

APPLICATION FORM

FAMILY LAST NAME: _____

CHILD / CHILDREN'S NAMES: _____

CHILD'S BIRTH DATE: _____

Date you require child care to start : ____/____/____

Days you wish to book:

	Monday	Tuesday	Wednesday	Thursday	Friday
In					
Out					

In = Time the child will arrive at the centre

Out = Time the child will leave the centre

I have read and understood the fee schedule and agree to pay weekly or in advance.

Parent / Guardian Signature: _____

Full Name: _____

Address: _____

Ph No: _____ Mobile: _____

Date: ____/____/____

Bookings will be made on availability,
If no availability this form is put on to the waiting list.