

Explore & Develop Breakfast Point Waitlist Application

Please note, a \$20 non-refundable deposit is required with lodgement of this form

Payment Details: Explore & Develop Breakfast Point

BSB: 082-494 Account No: 82 554 2314

Child's Surname:	First Name:
Date of Birth:	Age in years and months (ideally when commencing care):
No of days required:	Preferred days:

Please indicate when you would like attendance to commence:

How did you hear about us? Explore & Develop Website / Internet / Council Listing / Care for Kids / Facebook / Medical centre Adverts / Other _____

Parent/ Carer One	Parent/ Carer Two
Name:	Name:
Employer:	Employer:
Occupation:	Occupation:
Email:	Email:
Phone (H):	Phone (H):
Mobile:	Mobile:
Phone (W):	Phone (W):
Home Address:	Home Address:
Language/s spoken:	Language/s spoken:

Does your child have any particular/special needs?

Applicant's signature:	Date:
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Please return this form directly to the centre or by emailing to jaynem@exploreanddevelop.com.au

Completion of this form places your child's name onto the waiting list however does not guarantee a place.

Please ensure you inform the centre of any changes in your details so we can update your Waitlist Application.

Child Care Subsidy (maximum of 50 hours per week) is available.

Thank you for considering Explore & Develop!

Explore & Develop – Breakfast Point

2 Cross Street, Breakfast Point, NSW 2137

Tel 02 9743 0055

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