

Go Bananas Early Learning Centre
243 Forrester Road St Marys 2760
T: 9677 7799
E: education@gobananas.net.au
W: www.gobananas.net.au



Go Bananas
Early Learning Centre

Waiting List Application Form

Please use a separate form for each child- All fields are mandatory

A \$50 waitlist administration fee is required for each application (please refer to payment options below)

Child's Details

Given Names	
Surname	
Date of Birth	
Place of Birth	
Sex	
Primary Language spoken	
Child's Address	
Desired Commencement Date for Care	

Preferred days of attendance *(please select)*

Days Requiring Care	Monday	Tuesday	Wednesday	Thursday	Friday
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

	Child
0-2 years old	<input type="checkbox"/>
2-3 years old	<input type="checkbox"/>
3-5 years old	<input type="checkbox"/>

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Parent/Guardian 1		Parent/Guardian 2	
Full name:		Full name:	
Parent CRN Number:			
Date of Birth:			
Relationship to child:		Relationship to child:	
Contact Number:	H) M) W)	Contact Number:	H) M) W)
Address:		Address:	
Email:		Email:	

Special Needs

Go Bananas is committed to providing quality Child Care for all children including those with additional needs, allergies or medical conditions. If your child has any additional needs, please provide details below:

Priority of Access

The Commonwealth Government regards children at risk of abuse or neglect as a priority for access to Child Care. Families in crisis are also regarded as priority requiring support and assistance from Child Care services to the maximum extent possible. The Commonwealth Government provides guidelines for Child Care centres for the purpose of meeting the Child Care needs of families with recognized work or work-related commitments.

Where demands for care exceed supply, Go Bananas will allocate available places to those families with the greatest need for Child Care support. Every effort will be made within the guidelines to accommodate your Child Care needs, subject to available spaces.

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Acknowledgement

I hereby acknowledge that the information provided above is true and accurate:

Parent/Guardian Name: _____

Parent/Guardian Signature: _____

Date: _____

Waitlist Administration Payment Options:

Payment of the \$50 administrative fee is required to be
submitted with this completed form. Payment Option:

Credit Card

Card Type: ☐ Visa ☐ Mastercard

Card Number:

Expiry Date: _____

Amount: _____

Name on Card: _____

Signature: _____