|  |
| --- |
| **Blue Gum Community School**  **Hackett Campus (Playgroup/Preschool/Primary/Middle/High School): 114 Maitland Street, Hackett ACT 2602**  **Dickson Campus (Preschool): 49 Stockdale Street, Dickson ACT 2602**  **p: (02) 6230 6776 e:** [**school@bluegum.act.edu.au**](mailto:school@bluegum.act.edu.au) **w: www.bluegum.act.edu.au** |

**Playgroup Family WAIT LIST Application**

**Preferred STARTING DATE:­­­­­­­­­­­­­­­­­­­­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**ENROLMENT OPTIONS:**

**PLAYGROUP options:** (Please number your preferences: 1st, 2nd…)

**PLAYGROUP preference** ….. Tuesdays 9:30am -11:30am

**PLAYGROUP preference** ….. Tuesdays 10:30am -12.30pm

**BUSH PLAYGROUP** **pref.** ….. Wednesdays 9:30am -11:30am (@Mt Majura)

**PLAYGROUP preference** ….. Thursdays 9:30am -11:30am

**PLAYGROUP preference** ….. Thursdays 10:30am -12.30pm

**CHILD’s Full Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ M/F/\_\_\_ Date of Birth\_\_/\_\_\_/\_\_\_**

**CHILD’s Full Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ M/F/\_\_\_ Date of Birth\_\_/\_\_\_/\_\_\_**

**PARENT/S names: (Mr/Ms/Mrs/\_\_\_) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**HOME address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**EMAIL addresses: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**PHONE numbers: Day­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Evening \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

***Where did you first hear about Blue Gum Playgroup?***

**\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\***

**When assessing our Application, please take note of the following:**

* Our family has another child enrolled in Blue Gum Preschool or School Yes/No
* We wish to be considered for a Blue Gum Preschool place in the future Yes/No

If yes, for which year? **\_\_\_\_\_\_\_\_\_\_\_\_**

**Signed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date\_\_\_/\_\_\_/\_\_\_\_**

**Please return this Application via email to:**

[**school@bluegum.act.edu.au**](mailto:SCHOOL@BLUEGUM.ACT.EDU.AU)

***Thank you!***