Hunter Mobile Preschool
Learn to play. Play to learn.

3/5 Anlaby Street, Maitland NSW 2320
Office Ph/Fax: 02 49346725
Email: lhactivityvan@bigpond.com
Gresford, Vacy & Mulbring Van: 0408 684 942
Wollombi & East Cessnock Van: 0407 359 105
Lochinvar & Gillieston Heights Van: 0455 116 393
OSHC (Gresford): 0447 504 978
OSHC (Vacy): 0455 040 998
huntermobilepreschool.com.au

PRE-ENROLMENT FORM

November 2021

Child's Full Name:

_____

Sex: _____ **Date of Birth:** _____

Nationality/Cultural background: _____

Please indicate the venue you would like your child to attend:

□ Vacy - Monday
□ Vacy – Tuesday
□ Mulbring – Wednesday
□ Gresford – Thursday
□ Gresford - Friday
□ Kitchener – Monday
□ Kitchener – Tuesday
□ Lochinvar - Wednesday
□ Lochinvar - Thursday
□ East Cessnock - Monday
□ East Cessnock - Tuesday
□ Wollombi – Wednesday
□ Wollombi – Thursday

Parent 1/Guardian's full name:

_____

Address: _____

Home phone: _____ **Mobile:** _____

Email address: _____

Does your child have any known disabilities or allergies?

_____

Do you have a Health Care Card? Yes / No

How did you find out / hear about our service?

_____

Year in which you would like your child to begin Pre-school: 20 _____

Signature of Parent/Guardian: _____ **Date:** _____

Once this form is completed, it can be returned:
In Person – Drop in to your chosen venue, and hand it to the staff
Mail – 3/5 Anlaby Street Maitland 2320
Scan/Email – lhactivityvan@bigpond.com

OFFICE USE ONLY
Please ensure that pre-enrolment information accompanies this form.
Information sheet EMAILED MAILED IN PERSON NO (Reason) _____ **Initials** ___*eo*___
DATE POSITION OFFERED _____ **ACCEPTED Y/N START DATE** _____
COMMENTS