

## Parent/Carer Details

Date of Enquiry:

Contact Name:

Address:

Phone:

## Childs details

Childs Name

Date of Birth

## Days Required

Please select days required	Monday	<input type="checkbox"/>	Tuesday	<input type="checkbox"/>
	Wednesday	<input type="checkbox"/>	Thursday	<input type="checkbox"/>
	Friday	<input type="checkbox"/>		

Comments

## Childs Room

Please select Kindy Room 2.5-5yr ☐ Nursery Room 0-2.5yr ☐

## Start Date Requesting

## Priority Access- Positions are allocated based on Priority Access Guidelines

Please select all those areas relevant to your situation

Aboriginal/Torres Strait Islander	<input type="checkbox"/>	Disability	<input type="checkbox"/>
Working	<input type="checkbox"/>	Non-working	<input type="checkbox"/>
Studying	<input type="checkbox"/>		

## Working Details – Please advise place of Employment

Parent/Carer Name:

Place of Employment:

Parent/Carer Name:

Place of Employment:

## Authority- To be completed by HI Kindy Staff – Updated Allocation Report

Name and Sign:

Date:

Any Extra Information:

Generally, the type of personal information we collect about you is the information that is needed in relation to your enrolment. For example, we may collect details such as your name, residential address, mailing address, telephone number and email address. By proceeding you agree with the terms set out in the applicable Hamilton Island's Privacy Policy available at <https://www.hamiltonisland.com.au/general-business-privacy-policy>