



**WAITING LIST APPLICATION FORM**

**DATE OF ENQUIRY:** ..... **PLANNED START DATE:** .....

1<sup>ST</sup> PARENT/GUARDIAN FULL NAME: .....

2<sup>ND</sup> PARENT/GUARDIAN FULL NAME: .....

**ADDRESS:**

.....  
 .....

**TELEPHONE CONTACT No** HOME:.....

WORK:.....

MOBILE:.....

**\*\*\* IMPORTANT \*\*\* Your email:**.....

(Please note that [email](#) is required/compulsory for the delivery of **Fee Information & Communication**)

**Cheeriokids email: [admin@cheeriokids.com.au](mailto:admin@cheeriokids.com.au)**

**OTHER CONTACT NUMBERS:**

CHILD'S FULL NAME:.....DATE OF BIRTH:.....

CHILD'S FULL NAME:.....DATE OF BIRTH:.....

CHILD'S FULL NAME:.....DATE OF BIRTH:.....

**DATE CARE REQUIRED:**

DAYS REQUIRING CARE (PLEASE CIRCLE DAY/S):

**MON**

**TUES**

**WED**

**THUR**

**FRI**

**COMMENTS:**

.....  
 .....  
 .....  
 .....

**REASON FOR REQUIRING CARE (PLEASE CIRCLE):**

WORK RELATED

STUDY RELATED

OTHER