



## EXPRESSION OF INTEREST REGISTRATION FORM

### OUR 3-YEAR-OLD PROGRAM FOR 2024 IS FULL

### WE ARE NO LONGER TAKING APPLICATIONS OR EXPRESSIONS OF INTEREST FOR WAITLIST

**PLEASE NOTE: This form is to register your interest in our kinder program - it does not GUARANTEE your child a place**

#### Session Required:

3-year old 2025     4-year old 2025     3-year old 2026     4-year old 2026

#### Child's Details:

Child's family name: \_\_\_\_\_

Child's given names: \_\_\_\_\_

Date of birth: \_\_\_\_/\_\_\_\_/\_\_\_\_

Female    Male

#### Parent / Guardian Details:

Name: \_\_\_\_\_ Relationship to Child \_\_\_\_\_

Address: \_\_\_\_\_ Postcode: \_\_\_\_\_

Phone: (Mobile) \_\_\_\_\_ Email address: \_\_\_\_\_

Language/s spoken at home: \_\_\_\_\_

1. Do you or your child hold a HCC or Pension Concession Card?  
(if YES, you will be required to provide a copy upon request)  Yes  No
2. Has a sibling/s attended Manchester Preschool in the past?  
(If yes to having a sibling attend MPS in the past, please provide the year and name of the sibling/s who attended.) \_\_\_\_\_  Yes  No
3. Is your child Aboriginal and/or Torres Strait Islander?  Yes  No
4. Are you or your child an Asylum Seeker or Refugee?  Yes  No
5. Does your child have a diagnosed disability?  
(If your child has a diagnosed disability, please briefly outline below any extra requirements if required)  
\_\_\_\_\_  Yes  No

**Completed expressions of interest may be submitted to Manchester Preschool Inc. in person, by mail or via email.**

**For any questions or to notify us of further information please call 9726 9204 or email**

**[enrol.manchester@kindergarten.vic.gov.au](mailto:enrol.manchester@kindergarten.vic.gov.au)**