



## 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:  4-year old 2024

#### 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)