



APPLICATION FOR ADMISSION

Child's Details

Date of birth		Gender	BOY. <input type="checkbox"/>	GIRL. <input type="checkbox"/>	(Please tick)
First name(s)		Surname			
Address					
Class applying for			Playgroup <input type="checkbox"/>	PP1 <input type="checkbox"/>	PP2 <input type="checkbox"/>
Year you would like to Enroll			2022 <input type="checkbox"/>	2023 <input type="checkbox"/>	2024 <input type="checkbox"/>
Term you would like to Join			Term 1 <input type="checkbox"/>	Term 2 <input type="checkbox"/>	Term 3 <input type="checkbox"/>
Student Current School					

First Parent / Guardian Details

Title		First name		Surname	
Relationship to child			Parental responsibility?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Home telephone number			Work telephone number		

Second Parent / Guardian Details

Title		First name		Surname	
Relationship to child			Parental responsibility?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Home telephone number			Work telephone number		

Additional Information

Area of Residence	
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Siblings

Do you have another child currently? enrolled at Happy Hearts Kindergarten?	
Does the student have any siblings less than 6 yrs old? If so, list them.	
Other Comments	

Signature

Signature		Date	
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