**PINEY LAKES Childcare - Advanced Childcare Enrolment Form Policy**

At Piney Lakes Childcare you have the option to pay a $100.00 deposit to secure a future enrolment on our waitlist. The deposit is used towards fees upon enrolment. The deposit is non-refundable upon change of mind if a position is confirmed. If we cannot offer you a position the deposit is refunded.

We can guarantee to give you a written offer four week either side of your preferred start date for your consideration and acceptance of the position.

In order to secure your placements please fill out the attached ***Advanced Childcare Enrolment Form*** which gathers information about your family, what days of care you require and intended start date. A Debit Success Form is also attached to gather your bank details. All transactions are processed via direct debit or credit card. Please note we DO NOT accept Amex or American Express cards.

Childcare fees are charged each week on a Monday for the week ahead. Your first charge will be for the week that you nominated as your ***intended start*** ***date*** on the enrolment form.

We require two weeks’ notice in writing should you choose not to proceed with attending the position held for your child.

If you have any further questions please contact

Piney Lakes Childcare

1 Winthrop Drive, Winthrop

6150

93324559

info@pineylakescc.com

Kind Regards,

Piney Lakes Management ☺

**Advanced Childcare Enrolment Form**

**(Used to secure your future placement)**

**PARENT DETAILS**

|  |  |
| --- | --- |
| **DATE OF ENQUIRY:** | |
| PARENT / GUARDIAN ONE | |
| Name: |  |
| Date of Birth: |  |
| Home Address: |  |
| Mobile Number: |  |
| Email Address: |  |

**CHILD DETAILS**

|  |  |
| --- | --- |
| CHILD | |
| Name: |  |
| **WHAT CARE DO YOU REQUIRE? Nursery / Toddlers / Kindy** | |
| Date of Birth: |  |
| Home Address: |  |
| *Intended Start Date***:** |  |
| **Days Required:** |  |

**SIBLINGS**

|  |  |
| --- | --- |
| **DO YOU REQUIRE CARE IN THE FUTURE FOR A SIBLING?** | |
| CHILD | |
| Name: |  |
| **WHAT CARE DO YOU REQUIRE? Nursery / Toddlers / Kindy** | |
| Date of Birth: |  |
| *Intended Start Date:* |  |
| **Days Required:** |  |