



## WAITING LIST FORM – 2023

Please place my child's name on the waiting list for;

Term 1

Term 2

Term 3

Term 4

### Program Preferred Day

Playgroup  Monday

Playclub  Thursday

Kindy  Tuesday  Wednesday  Friday

Child's Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

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

Parent's Name: \_\_\_\_\_ Mobile: \_\_\_\_\_

Email: \_\_\_\_\_ Home Ph: \_\_\_\_\_

Please return this Form to the Yangebup Family Centre. You will be contacted if a place becomes available.

#### **Yangebup Family Centre Inc.**

Phone: (08) 9417 9995

Email: [info@yangebupfamilycentre.org](mailto:info@yangebupfamilycentre.org)

11 Dunraven Drive, YANBUBUP

Postal: PO Box 3039, SUCCESS WA 6964

Office Use Only

Date: \_\_\_\_\_

Notes: