

RE-ENROLMENT CONFIRMATION

Dear Parents/Guardians

We are currenting considering placement for next year and ask that you assist us in this process by confirming your child’s enrolment for 2025.

We wish to offer the following enrolment:

|  |  |
| --- | --- |
| Child’s name |  |
|  | MONDAY | TUESDAY | WEDNESDAY | THURSDAY | FRIDAY |
| BSC | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  |
| ASC | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  |

RE-ENROLMENT [year]

[ ]  I wish to re-enrol my child for [year]. I confirm the booking above is correct.

[ ] I wish to request a change of days and session times to (please circle days requested): *All requests for changes to enrolment will be considered as per our Enrolment Policy.*

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| BSC | MONDAY | TUESDAY | WEDNESDAY | THURSDAY | FRIDAY |
| ASC | MONDAY | TUESDAY | WEDNESDAY | THURSDAY | FRIDAY |

[ ]  My child will not be returning in 2025, their last day of care will be:

|  |  |  |  |
| --- | --- | --- | --- |
| Last day of care |  | Leaving to attend school | Yes [ ]  No [ ]  |
| Reason for leaving |  |

*Re-enrolment for [year] is conditional on all outstanding fees for [current year] being paid in full by [day, month, year].*

|  |  |  |  |
| --- | --- | --- | --- |
| Parent/Guardian name |  | Date |  |
| Parent/Guardian signature |  |

PLEASE RETURN THIS FORM BY DATE

Regards

[Name]
[Position title]