**AGNES GOODE KINDERGARTEN   
COVER PAGE FOR ENROLMENT FORM**

To register your child at our Kindergarten, please fill out **this cover page** and attach to the **enrolment form.**   
  
Please post both forms to: Agnes Goode Kindergarten, 7 Cornish Street, Stepney, SA, 5069

Or email both the cover sheet and enrolment form to: dl.4601.leaders@schools.sa.edu.au

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| Parents name: | Contact number: |
| Your child’s name: | Date of birth: |
| When does your child start Kindergarten | |
| Preferred sessions: (please tick one) Monday/Tuesday or Wednesday/Thursday | |

Please tick the following

I live locally and intend sending my child to the local school.  
 What is the name of the school?

My child has attended Occasional Care at Agnes Goode.

I don’t live locally and would like to be placed on the waiting list.

I have had previous contact with the Kindergarten (via email/phone call or visit).  
 Who was the staff member you spoke to?

Any comments

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Parent/Caregiver signature:   
   
Dated:

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Received by (staff member): Date Received:*

(Please circle one) How was this enrolment received?:- post e-mail by hand