

CONFIRMATION OF OFFER

PLEASE COMPLETE THIS FORM FOR BOTH ACCEPTANCE OR NON-ACCEPTANCE

and return by **TUESDAY 1 AUGUST, 2017**

Offers not received by this date will be considered as a non-acceptance and your child's place will be forfeited.

STEP 1

Please quote your Kindergarten Reference Number

This number can be found on communications you have received from Bayside Council (e.g. KIND000254)

Kindergarten Reference Number _____

STEP 2

Please select one option:

1. I would like to **accept** the offer of a place in the **3 year old / 4 year old** group.
2. I would like to **defer** the offer of a place in the **4 year old** group.
3. I **do not wish to accept** the offer of a place in the **3 year old / 4 year old** group.

If declining, please state reason then go to STEP 6: _____

STEP 3

Please indicate your group preference by circling the group in the table below:

*(NB We will make every effort to place your child in your preferred group, but cannot make any guarantees. You will receive notification of your child's group by no later than **Monday 18 September**, following the completion of all three rounds of the Council Enrolment Process.)*

3 Year Old Program

Possums	Kookaburras	No preference
Monday 1.30pm - 4.00pm	Wednesday 1.00pm – 4.00pm	
Wednesday 8.30am – 11.30am	Friday 8.30am - 11.00am	

4 Year Old Program

Emus	Kangaroos	No Preference
Monday 8.30am - 1.00pm	Tuesday 8.30am - 4.00pm	
Tuesday 9.30am - 12.30pm (Outdoor Kinder - offsite)	Thursday 9.30am - 12.30pm (Outdoor Kinder - offsite)	
Thursday 8.30am - 4.00pm	Friday 11.30am - 4.00 pm	

STEP 4

Please complete the following details

CHILD'S NAME _____

PARENT/GUARDIAN NAME/S

1. _____

2. _____

EMAIL

PHONE NUMBERS

1. _____

1. _____

2. _____

2. _____

SIGNATURE/S _____

DATE ____/____/2017

N.B. Only one signature required

STEP 5

Please pay your **non-refundable acceptance deposit of \$100** to secure your child's place: (Eligible Concession Card holders exempt)

Direct Deposit	Cheque
BSB 063136 Account Number 10039639	Payable to 'Helen Paul Kindergarten'

Clearly record your child's first initial and surname as the reference so we can match your payment to your offer.

STEP 6

Include evidence of the deposit payment with your completed form:

e.g. copy of internet transfer or bank receipt

STEP 7

Return this form (with proof of deposit) to Helen Paul Kinder by FRIDAY 28 JULY

Postal Address

33 Kingston Street
Hampton
VIC 3188

Email

3 Year Old Program
Emily Compson - Enrolment Officer
hpk3enrolments@gmail.com

4 Year Old Program
Donna-Jane Acornley - Enrolment Officer
hpk4enrolments@gmail.com

Finalisation of Enrolment

In late September, once your child's place has been processed, you will receive further details from the Kindergarten to finalise the enrolment.

If you have any questions please refer to our website or contact our Enrolment Officers (details below).

3 Year Old Program	4 Year Old Program
Emily Compson hpk3enrolments@gmail.com	Donna-Jane Acornley hpk4enrolments@gmail.com