Darlington Children's Centre for Early Childhood Development and Parenting
12a Kurrajong Place
SEACOMBE GARDENS SA 5047
Phone: 8296 2686
Fax: 8377 1569
Email: dl.3624.leaders@schools.sa.edu.au
Government of South Australia

Occasional Care Registration of Interest

Please complete the details on this form to register your interest to enrol your child in a government preschool. This for is not confirmation of enrolment. If a place is available, you will be notified of an enrolment offer.

Section 1 – Child details

Family Name:	Date of Birth:
Given Names:	Gender:
Residential address:	
Suburb:	Postcode:

Section 2 – Child details

Family Name:	Date of Birth:	
Given Names:	Gender:	
Does the child/children identify as Aboriginal or Torres Strait Islander?	Yes ☐	No ☐
Does the child/children speak English?	Yes ☐	No ☐
Languages including Aboriginal spoken at home:		
Does your child/children attend childcare?	Yes ☐ how many days?	No ☐

1st Priority of spots for occasional care are given to children not accessing childcare:

Is Darlington your local kindergarten?	Yes ☐	No ☐

Is your child up to date with their immunisation?
(Medicare - Immunisation History Statement – accepted only)
Email statement to: dl.3624.leaders@schools.sa.edu.au

Yes ☐ No ☐

Does the child have any additional needs, disabilities or medical conditions that may require support: e.g. *Asthma, anaphylaxis, speech delay*

Yes ☐ No ☐

Details:

Parent Guardian information

Family Name: Given Names:

Mobile: Relationship to student

Email:

Is the child in care or has been in care (subject of a custody and guardianship order under the Children and Young People (Safety) Act 2017 (SA)?	Yes ☐	No ☐

Which session are you interested in? (please circle 2 options)

Monday
8:30am-11.30am
over 2's

Tuesday
8:30am-11.30am
over 2's

Thursday
8:30am-11.30am
over 2's

Thursday
12:15pm -3.15pm
over 2's

Friday
8:30am-11.30am
under 2's – (must be walking)
over 2's

Parent/Guardian signature Date

I have received a copy of the *priority of access policy:* ☐

Administration only

Date accepted the form:

Contacted parent/caregiver:

Enrolment form: ☐

Immunisation History Statement: ☐

Copy of priority of access given: ☐

Staff note: