



## ALTERATION OR CANCELLATION OF KINDERGARTEN ENROLMENT

Please use this form to change any details of your current kindergarten enrolment or cancel kindergarten enrolment.

Council Application No: \_\_\_\_\_

Child's Surname: \_\_\_\_\_

Child's First Name: \_\_\_\_\_

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

PLEASE COMPLETE RELEVANT SECTION(S) ONLY:

A. I wish to cancel my enrolment: YES / NO

Last date of attendance at Kindergarten: \_\_\_\_\_

B. I wish to defer my enrolment from 20.....to 20.....: YES / NO

My new enrolment form is attached: YES / NO

*(A new enrolment form must be submitted if you are deferring enrolment)*

C. I wish to change my kindergarten preferences to:

i) \_\_\_\_\_

ii) \_\_\_\_\_

iii) \_\_\_\_\_

D. I wish to change my kindergarten allocation from:

\_\_\_\_\_

to \_\_\_\_\_

E. I wish to change my personal details as follows: (change in name/address/telephone etc... please specify)

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Parent/Guardian Name: \_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Return Completed Form to:  
Mitchell Shire Council, 113 High Street, Broadford, 3658  
Drop of at any Mitchell Shire Library, or fax to (03) 5734 6215  
For enquires phone: (03) 5734 6200

*Mitchell Shire Council acknowledges and respects the privacy of individuals. Personal information collected by Council is used for municipal purposes as specified in the Local Government Act 1989. The information provided on this form will be used to ensure the accuracy of Councils property data base.*

Office Use:  
Date Received: \_\_\_\_\_ Date Confirmation Sent: \_\_\_\_\_ Application No: \_\_\_\_\_

Accounts advised: YES / NO Kinder advised: YES / NO Database updated: YES / NO