



O'BRIENS MONTESSORI CENTRE

APPLICATION FORM

Please complete this form and return to the office with a \$100 application fee. This fee is non-refundable and not transferable. A EFTPOS machine is available in the office.

If you would like to pay via EFT - BSB 015300 Acc 482540885 Please use your child's name as a reference.

Please nominate the days that you are enrolling your child for and when you would like your child to start.

Today's date.....

Please circle days required please note that there is a minimum of two days that must be selected. Please advise us if you are flexible with days?

Monday Tuesday Wednesday Thursday Friday

Nominate pickup times 8am -4pm 8am-5pm

You are welcome to have a mix of session pickup times.

Flexible with days?.....

Preferred start date.....

Child's name.....

Child's date of birth.....

Parent's name.....

Address.....

Phone.....

Email

Your child must be toilet trained to attend the centre at three years of age. We do not have the change facilities to cater for nappies etc.

Are there any special considerations of which we should be aware of, for example, medical conditions?

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