



SOPHIA
MUNDI

The Inner City Steiner School P-12

Family Playgroup Application Form

PARTICULARS OF CHILD

Surname _____ Date of Birth ___ / ___ / _____ **M / F**

Other Names _____ Proposed year of entry _____

Is the child a Torres Strait Islander or of Aboriginal descent? **YES NO** (please circle)

FAMILY INFORMATION

Mother's name _____ Occupation (optional) _____

Email address _____

Address _____ Postcode _____

Home phone _____ Work phone _____ Mobile _____

Father's name _____ Occupation (optional) _____ - _____

Email address _____

Address _____ Postcode _____

Home phone _____ Work phone _____ Mobile _____

Siblings Name _____ **M / F** Date of Birth _____

 Name _____ **M / F** Date of Birth _____

 Name _____ **M / F** Date of Birth _____

Children living with (please circle): Mother Father Both parents

Please indicate your preferred Playgroup session (ordering as 1st, 2nd, 3rd):

TUE am **THUR am** **FRI am**

_____ _____ _____

Please note that your preference will always be taken into consideration but cannot be guaranteed.

(We are currently not offering afternoon sessions)

SOPHIA MUNDI Limited

St Mary's, Abbotsford Convent

1 St Heliers Street, Abbotsford Victoria 3067 Australia

T 03 9419 9229 F 03 9419 0835 E enquiries@sophiamundi.vic.edu.au www.sophiamundi.vic.edu.au

A.B.N. 44 006 411 016

The Applicants, whose signatures appear below, shall be jointly and severally responsible for the payment of all fees and charges. In the case of a two-parent family, both parents must sign the application form. If my / our child's enrolment is accepted, I / we undertake to honour the commitments regarding fee policy and payment of fees as determined by the school from time to time.

A registration fee of \$20.00 must accompany this application

Payment may be made by:

Cheque made out to "Sophia Mundi Steiner School",

Credit Card To pay by Mastercard or Visa, please phone 9419 9229

Direct Bank Transfer please use your child's name as a reference and deposit funds into:

BSB 083-155 **Account Number** 57-773-4025 **Account Name** Sophia Mundi Ltd

Enrolment in Playgroup DOES NOT ensure a place at Sophia Mundi Steiner School; a separate application must be completed.

Signed _____ Date __ / __ / ____ Signed _____ Date __ / __ / ____

OFFICE USE ONLY

Application Fee \$20.00 *Received per* *Payment Type:* *Date*

Term Fee \$220.00 + \$3 Library *Received per* *Payment Type:* *Date*

NOTES: