Greater Shepparton City Council

KINDERGARTEN CENTRAL REGISTRATION

## Change of Preference Form

|  |  |
| --- | --- |
| **Child’s Surname:** |  |
| **Child’s Given Name:** |  |
| **Date of Birth:** |  |

|  |  |
| --- | --- |
| **WITHDRAWING APPLICATION** | ***Please tick*** |
| I wish to withdraw my child’s Kindergarten application |  |

**OR**

|  |
| --- |
| **CHANGING PREFERENCE** |
| **Previous Preference:**(Kindergarten name) |  |

|  |  |
| --- | --- |
| **Current Preference:** (Kindergarten name) |  |

|  |  |
| --- | --- |
| **Parent/Guardian Name:** |  |
| **Parent/Guardian Signature:** |  |
| **Date:** |  |



|  |  |  |
| --- | --- | --- |
| **In person:** Children’s and Youth ServicesGreater Shepparton City Council90 Welsford Street, Shepparton | **By post:** Greater Shepparton City CouncilLocked Bag 1000Shepparton VIC 3632 | **By email:** **central.enrolment@shepparton.vic.gov.au** |

This form will only be valid after being stamped / dated at Council’s Office and if an original enrolment form has been completed and receipted at Council.

Greater Shepparton City Council complies with the *Privacy and Data Protection Act 2014 (Vic)*