



# CARE REGISTER APPLICATION

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Form for parents to complete with contact details and care requirements

**First name\***

**Surname\***

**Relationship to child/ren**

**Email\***

**Contact number\***

**Address line 1\***

**Address line 2**

**Suburb\***

**State\***

[Choose One]

**Postcode\***

**Employer/Place of Study**

**Occupation**

**Child's First Name**

**Child's Surname**

### **Child's Date of Birth**

### **Preferred Days of Care**

- ☐ Monday
- ☐ Tuesday
- ☐ Wednesday
- ☐ Thursday
- ☐ Friday
- ☐ Saturday
- ☐ Sunday

### **Do you have another child requiring care?**

- ☐ Yes
- ☐ No

**Please complete the details of your other child/ren**

**Is this your only child needing care?\***

☐ Yes

☐ No

**Child's Date of Birth**

**Child's First Name**

**Reason for Care**

☐ Work

☐ Study

☐ Respite/Interaction with other children

☐ Disability

☐ At Risk

☐ OtherOther text

### **Type of Care Required**

- ☐ Permanent
- ☐ Casual
- ☐ Shift/Roster
- ☐ Before/After School
- ☐ School Holidays
- ☐ School Terms Only
- ☐ Emergency/Occasional/Temporary Care

### **Care Required From**

### **Other Placement Information**

### **Preferred Educator**

**What are you looking for in an Educator?**

**What is important to you in a service/what are you looking for?**

### How did you hear about Dubbo Family Day Care?

- ☐ Social media
- ☐ Website
- ☐ Friend/Colleague
- ☐ Know an Educator
- ☐ Community Event
- ☐ Newspaper/Radio Advertising
- ☐ Used Previously
- ☐ OtherOther text

Mandatory field(s) marked with \*

Submit

Last Edited: 15 Aug 2023