

Application Form.

Central Registration System

Important information

About the Central Registration System (CRS)

Yarra City Council's CRS provides an easy and impartial way for families to register their children into Council operated or participating community based children's services, including:

- Long day care
- Pre-kindergarten - sessional
- Kindergarten - sessional

Maternal and Child Health (MCH) Service

The MCH Service is available to you for advice and support on parenting, assessment of your child's growth and development, and family health needs. For an appointment call **9205 5599**.

About this application form

Please complete all sections of this form and return as soon as possible. Incomplete forms will be returned and will delay your application.

By completing this form, you are registering your child for a children's service in Yarra. Your details and service preferences will be recorded on the register to ensure your child is offered a place at a children's service in line with the information you have provided on the form.

We encourage you to register for future services you may require and to nominate your preferences for kindergarten on this form.

Child details All applicable sections must be completed

First name

Last name

Preferred name

Date of birth (DD/MM/YYYY)

Gender

Country of birth

Cultural background

Main language spoken at home

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Parent/Guardian details All applicable sections must be completed

Persons authorised to complete this form

A parent includes a guardian of the child and/or a person with parental responsibility for the child under a decision or court order.

A parent or guardian who has parental responsibility in relation to the child is required to complete this form. Please print clearly in the spaces provided.

Parent/Guardian 1 (This is the person filling out the form. All correspondence and information will be sent using these contact details)

First name

Last name

Relationship to child

Cultural background

Do you require an interpreter? Yes No

If yes which language?

Mobile

Email

Address

Postcode

Parent/Guardian 2

First name

Last name

Relationship to child

Cultural background

Do you require an interpreter? Yes No

If yes which language?

Mobile

Email

Address

Postcode

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Priority of Access information All applicable sections must be completed

Access to children's services in the City of Yarra is guided by Commonwealth guidelines and/or Council's Priority of Access Policy. Council's Priority of Access Policy can be found here yarracity.vic.gov.au/priorityofaccess

You can find out more about the Commonwealth Priority of Access Guidelines at education.gov.au/priority-filling-child-care-places

If you tick "Yes" for any of these questions, please include supporting documentation.

For example a copy of your Health Care Card, or evidence to support referral (document or letter from Doctor or Referral Service (DHS, Child First, Enhanced Maternal Health Nurse) or other Allied Health Professional or other support network).

Is the child currently enrolled in a City of Yarra managed service for long day care or pre kindergarten in the year before funded kindergarten?

Yes **Provide details below and attach proof** No

Does the child have a sibling enrolled in the same City of Yarra managed service that you are requesting?

Yes **Provide details below and attach proof** No

Is the child of Aboriginal or Torres Strait Islander descent? Yes No

Is the child/family from a refugee or asylum seeker background? Yes No

Do you or the child hold a current Health Care Card? Yes **Attach proof** No

Are you a single parent family? Yes No

Do you live in the City of Yarra? Yes **Attach proof** No

Are you a parent working/studying? Yes **Attach proof** No

Does your family work or study in the City of Yarra? Yes **Attach proof** No

Is there a diagnosis of a chronic or serious health issue in the immediate family?

Serious health issue is defined as a diagnosed condition that impacts on your capacity to care for your child.

Yes **Attach proof** No

Is there a diagnosis of a disability in the immediate family? Yes **Detail below** No

Is the child at risk of serious abuse or neglect?

Provide details, attach proof and contact Customer and Business Support team to discuss the priority of this application.

Yes **Provide details below and attach proof** No

Is there a situation of family violence for the child?

Provide details, attach proof and contact Customer and Business Support team to discuss the priority of this application.

Yes **Provide details below and attach proof** No

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Priority of Access information All applicable sections must be completed

Does the child need priority care due to a serious change of circumstance?

This may include death of an immediate family member, cancer treatment, loss of accommodation due to fire/natural disaster, court hearings.

Yes [Details below](#) No

Is the child in out of home care?

Yes [Attach proof](#) No

Does the child have additional needs?

Yes [Attach proof](#) No

Additional needs is defined as children who:

- require additional assistance in order to fully participate in kindergarten; require a combination of services which are individually planned
- have an identified specific disability or developmental delay

Is your family on an income that qualifies you for the highest Child Care Subsidy?

Yes No

Is the child in receipt of additional Child Care Subsidy?

Yes [Attach proof](#) No

This includes child at risk, grandparent childcare subsidy or temporary financial hardship subsidy

Long Day Care All applicable sections must be completed

Service preference

From the list of services given, please nominate the services you wish to register for. Your child may be offered a place at any of the services you have listed as a preference, so we encourage you to nominate services at which you would happily accept a place if offered. We suggest that you visit the services you have nominated. The greater number of services nominated will increase the probability of being offered a vacancy. The first available vacancy at any of your nominated services will be offered to your child.

Active registration (Long Day Care only)

When applying for children's services, you can nominate a date you would like the registration to become 'active'. When the registration is 'active', families are indicating they are prepared to accept a vacancy when it is offered.

Date for your registration to be made active (DD/MM/YYYY)

Please number (in order of preference) which centres you wish to be considered for

Put number 1 next to your first choice, 2 next to your second choice and so on.

- North Carlton Children's Centre 481 Canning Street, North Carlton
- Yarraberg Children's Centre 4 River Street, Richmond
- Gold Street Children's Centre 64 Gold Street, Collingwood
- Keele Street Children's Centre 171 Keele Street, Collingwood
- Connie Benn Early Learning Centre 160 Brunswick Street, Fitzroy

Select the days you require long day care Monday Tuesday Wednesday Thursday Friday

Would you accept alternative days and/or less than your preferred days? Yes No

Kindergarten programs

You may also nominate your preference for kindergarten on this form. You may choose from sessional kindergarten programs or kindergarten programs that operate in a long day care setting (integrated).

Session times

Session times for pre-kindergarten or funded kindergarten programs will be confirmed sometime after July prior to the year of commencement.

Funded kindergarten

The Government provides funding so children can access a kindergarten program in the year before they start school. To be eligible, a child must be 4 years of age by 30 April in the year they commence kindergarten.

Your child can only be counted at one kindergarten location and attend only one kindergarten program at any one time.

Your MCH nurse will be happy to provide information and advice regarding school entry age.

Pre-kindergarten - sessional All applicable sections must be completed

From the list below, select the year your child will attend pre-kindergarten

The year they attend will depend on their year of birth, use the dates below as reference.

- 2020** Date of birth between 01/05/2016 – 30/04/2017
- 2021** Date of birth between 01/05/2017 – 30/04/2018
- 2022** Date of birth between 01/05/2018 – 30/04/2019
- 2023** Date of birth between 01/05/2019 – 30/04/2020
- 2024** Date of birth between 01/05/2020 – 30/04/2021
- 2025** Date of birth between 01/05/2021 – 30/04/2022
- 2026** Date of birth between 01/05/2022 – 30/04/2023

Please number (in order of preference) which centres you wish to be considered for

Put number 1 next to your first choice, 2 next to your second choice and so on.

- Richmond Kindergarten** 27 Duke Street, Richmond
- Princes Hill Kindergarten** corner Wilson and Pigdon streets, Princes Hill
- North Carlton Kindergarten** 481 Canning Street, North Carlton
- Yarralea Children's Centre** 54 Yarralea Street, Alphington
- Connie Benn Kindergarten** 160 Brunswick Street, Fitzroy

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Kindergarten - sessional All applicable sections must be completed

From the list below, select the year your child will attend funded kindergarten

The year they attend will depend on their year of birth, use the dates below as reference.

- 2020** Date of birth between 01/05/2015 – 30/04/2016
- 2021** Date of birth between 01/05/2016 – 30/04/2017
- 2022** Date of birth between 01/05/2017 – 30/04/2018
- 2023** Date of birth between 01/05/2018 – 30/04/2019
- 2024** Date of birth between 01/05/2019 – 30/04/2020
- 2025** Date of birth between 01/05/2020 – 30/04/2021
- 2026** Date of birth between 01/05/2021 – 30/04/2022

Please number (in order of preference) which centres you wish to be considered for

Put number 1 next to your first choice, 2 next to your second choice and so on.

- Richmond Kindergarten** 27 Duke Street, Richmond
- Princes Hill Kindergarten** corner Wilson and Pigdon streets, Princes Hill
- North Carlton Kindergarten** 481 Canning Street, North Carlton
- Connie Benn Kindergarten** 160 Brunswick Street, Fitzroy

Integrated Long Day Care kindergarten program

- Gold Street Children's Centre** 64 Gold Street, Collingwood
- Yarraberg Children's Centre** 4 River Street, Richmond
- Yarralea Children's Centre** 54 Yarralea Street, Alphington
- Connie Benn Early Learning Centre** 160 Brunswick Street, Fitzroy

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Supporting document checklist

Access to children's services in the City of Yarra is guided by Commonwealth guidelines and/or Council's Priority of Access Policy. You are required to provide documentation to support your claim for priority. **Please ensure you include copies of all relevant documentation when submitting your application form.**

Proof of residency A copy of either **A) Current rates notice B) Current utility account C) Current bank statement.**

Proof of concession status A copy of your current Health Care Card

Proof of employment or study A copy of either **D) Payslip E) Statement of enrolment in study**

Evidence to support referral Document or letter from Doctor or Referral Service (DHS, Child First, Enhanced Maternal Health Nurse) or other Allied Health Professional or other support network.

Fees and methods of payment

Administration fee

There is a non refundable administration payment of \$15.00 (inc. GST) per child.

Proof of payment

This form, when submitted must have payment receipt attached. The form will be returned to you if payment details are not submitted and will delay processing your application.

Payment options

Make cheques or money orders payable to Yarra City Council.

Mail

Mail your completed form with cheque or money order to:
Yarra City Council
PO Box 168 Richmond VIC 3121

In person

To pay with cash, cheque, money order, credit card** or EFTPOS present this completed form and accompanying documents at a customer service centre listed below:

- 182 St Georges Road, Fitzroy North
- 140 Hoddle Street, Abbotsford
- 160 Brunswick Street, Fitzroy
- 333 Bridge Road, Richmond

**Surcharge of 0.5% applies to all credit card payments.

Privacy statement

The information will be available to the participating services for the purpose of registering your child in that service and will not be disclosed to any other party except as required by law. You may access this information and correct it if necessary by contacting the Customer and Business Support team on 9205 5465.

Declaration

- The information contained in this application for Yarra City Council's Central Registration System is true and correct.
- I understand that deliberately providing misleading information may lead to my place/offer being revoked.
- I understand that incomplete forms and/or non-payment will be returned for my attention and may delay my application being processed.

First name

Last name

Signature

Date