

ENROLMENT FEE

I hereby accept the place offered to my child
(Child's name in full):
to attend Cairns Community Kindergarten in 2024 and agree to pay the enrolment fee of \$40 (\$10 concession card holders).
Bank: Queensland Country Bank Name: Cairns Community Kindergarten BSB: 654 000 Account Number: 41537163 Reference: Your name
I understand this enrolment fee secures my child's place at Cairns Community Kindergarten, includes our membership fees and is Non-Refundable.
Parent's Name
Signed Date
Office use:
Date Received Receipt Number



Tel. 07 4051 5913 Email. office@cck.org.au www. cairnscommunitykindy.org.au Add. 174-178 Gatton Street, Cairns QLD 4870 Postal. PO Box 41, Manunda QLD 4870