

Test 3

LISTENING

SECTION 1 Questions 1–10

Complete the form below.

Write **ONE WORD AND/OR A NUMBER** for each answer.

Early Learning Childcare Centre Enrolment Form

Example

Parent or guardian: Carol Smith

Personal Details

Child's name: Kate

Age: 1

Address: 2 Road, Woodside, 4032

Phone: 3345 9865

Childcare Information

Days enrolled for: Monday and 3

Start time: 4 am

Childcare group: the 5 group

Which meal/s are required each day? 6

Medical conditions: needs 7

Emergency contact: Jenny 8 Phone: 3346 7523

Relationship to child: 9

Fees

Will pay each 10