

Enrolment Form for Crèche/Childcare

CC SF 11

Belgravia Leisure Group Pty Ltd
Windy Hill Fitness Centre
APPLICATION FOR ENROLMENT OF CHILD
Confidential and Subject to Approval by Supervisor

All sections must be completed before a child can be enrolled. Please notify us promptly of any changes.

Date: ____/____/____

CHILDS DETAILS:

Surname	Given Name	Date of birth	Age	Male/Female
1.				
Address:				

PARENT/GUARDIAN 1

Full Name: _____

Residential Address: _____

Work Address: _____

Phone: (work)_____ (home)_____ (mobile)_____

Email Address _____

PARENT/GUARDIAN 2

Full Name: _____

Residential Address: _____

Work Address: _____

Phone: (work)_____ (home)_____ (mobile)_____

Email Address _____

COURT ORDERS

Are there any Family Court orders relating to the powers, duties or responsibilities affecting custody of, or access to the child? YES / NO

If yes, please give details and a copy must be provided:

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LANGUAGE SPOKEN AT HOME

Is the language spoken at home other than English: - if so what language: _____

EMERGENCY CONTACT (Name of 2 people who are authorised to collect and care for the child if the parent/guardian is unavailable to be contacted in the event of any accident, injury, trauma or illness of the child)

1. Full Name: _____ (r/ship) _____

Address: _____

Phone: (work) _____ (home) _____ (mobile) _____

2. Full Name: _____ (r/ship) _____

Address: _____

Phone:(work) _____ (home) _____ (mobile) _____

OTHER RELEVANT INFORMATION

AUTHORISATION TO COLLECT YOUR CHILD

We require you to provide the names of the persons authorised to collect your child from the Centre.

In order that staff know exactly who is authorised to collect your child from the ***Windy Hill Fitness Centre*** please complete the following.

Please note that we will not (under any circumstances) allow any person to collect your child other than those listed below. Alternate arrangements will only apply where proper notification from you in writing is received on that particular day. Please include parent's names on the list.

1. Name of person: _____ Relationship: _____

Address: _____ Phone: _____

2. Name of person: _____ Relationship: _____

Address: _____ Phone: _____

3. Name of person: _____ Relationship: _____

Address: _____ Phone: _____

PARENT'S SIGNATURE: _____

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CHILD'S HEALTH INFORMATION:

Name doctor/Medical Service: _____ Telephone: _____

Address Doctor/Medical Service: _____

Maternal & Child Health (MCH) Centre _____

Does your child have a child health record? No Yes

If Yes, please provide to the service for sighting

Child health record means a record that documents a child's health and development assessments & immunisations.

Name and position of person at the children's service who has sighted the child's health record.

Name: _____ Position: _____

CHILD'S MEDICAL INFORMATION

Does your child have any special needs? No Yes

If yes please provide details of any special needs and any management procedure to be followed with respect to the special need.

Does your child have any allergies or sensitivity? No Yes

If yes please provide details of any allergies and any management procedure to be followed with respect to the allergy.

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ANAPHYLAXIS

Has your child been diagnosed at risk of anaphylaxis? No Yes

Does your child have an auto injection device (eg EpiPen)? No Yes

Has the anaphylaxis medical management plan been provided to the service No Yes

Has a risk management plan been completed by the service in consultation with you? No Yes

In the case of anaphylaxis you will be provided with a copy of the services anaphylaxis management policy. You will be required to provide the service with an individual medical management plan for your child signed by the medical practitioner who is treating your child. This will be attached to your child's enrolment form. More information is available at www.education.vic.gov.au/anaphylaxis

Does your child have any other medical conditions? (eg asthma, epilepsy, diabetes etc that are relevant to the care of your child) No Yes

If yes, please provide details of any medical condition and any management procedure to be followed with respect to the medical condition.

Does the child have any dietary restrictions? No Yes

If yes, the following restrictions apply:

TOILET TRAINING

1. Is your child toilet trained? No Yes

2. **If yes**, at what stage are they: _____

CHILDS LIKES AND DISLIKES

Your child's likes and dislikes e.g. excessive fears are important to us. Please feel free to list any details about your child that will assist with our program and make your child's stay with us a happy one.

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CONDITIONS

By enrolling my child I agree to the following conditions:

1. Child is only accepted into the crèche from 12 weeks of age.
2. I am willing for my child to participate in all activities offered in the crèche. I agree it is my responsibility to familiarise myself with the program and to advise the Centre in writing if I do not wish my child to participate in a particular activity.
3. Although every care will be taken, Centre Staff are free from all responsibility for accidents or loss of property in connection with any child's participation.
4. The Centre reserves the right to exclude child from the Crèche for misbehaviour that is deemed inappropriate.

NOTE: in the event of suspension or expulsion from the Crèche, it is the parents' responsibility to have the child collected immediately. No monies will be refunded for that session.

5. The Centre reserves the right to refuse any child or person entry to the Crèche.
6. I hereby **agree/disagree** to photo's of my child being taken during the program for advertising and centre purposes. (**please circle your preference**)

Authorisation

In the event of an accident or illness suffered by my child, I understand that the staff of the **Windy Hill Fitness Centre** Crèche/Childcare service will try their best and contact me the parents/guardian. When it is impractical or impossible to communicate with me the parent/guardian, I authorise the Crèche/Childcare staff to obtain on my behalf, such medical, surgical treatment or Ambulance service as may be deemed necessary and in the best interest of the child. I also agree to pay any expense associated with the treatment given to my child/ward.

DECLARATION

I declare that the information above is complete and accurate, and I have read, understood and agree to the conditions outlined above.

I understand and agree that all times my child shall be at my own risk and I will not hold the Company, the centre or its staff liable for any personal injury which may result to my child or loss of property except for any liability by the Company if it fails to render its services with due care and skill or supplies any material in connection with those services which is not reasonably fit for the purpose for which they are supplied.

Parent sign: _____

Date: ____/____/____

Print Name: _____

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Confidentiality of enrolment records

The proprietor of the children's service must ensure that information in the child's enrolment record is not divulged to another person unless necessary for the care or education of the child, to manage medical treatment of the child, where expressly authorised by the parent or prescribed in the Children Services Regulations 2009 (regulation 35(1)(d-e))

Lawful Authority

Parents

All parents have powers and responsibilities in relation to their children that can only be changed by a court order. The Children's Services Regulations 2009 refer to these powers and responsibilities as "lawful authority". It is not affected by the relationship between the parents, such as whether or not they have lived together or are married. A court order, such as under the Family Law Act, may take away the authority of a parent to do something, or may give it to another person.

Guardians

A guardian of a child also has lawful authority. A legal guardian is given lawful authority by a court order. The definition of "guardian" under the *Children's Services Act 1996* also covers situations where a child does not live with his or her parents and there are no court orders. In these cases, the guardian is the person the child lives with who has day-to-day care and control of the child.

Proprietors are reminded of their requirement to comply with the information Privacy Act 2000, which requires a Privacy Collection Statement to accompany any enrolment form.