



CANNING VALE SCHOOL
OF EARLY LEARNING

ENROLMENT FORM

- 11/98 Waratah Boulevard W.A. 6155
- Phone: (08) 9455 7836
- Email: admin@cvsel.com.au
- ACN: 651 528 924
- Approval Number: SE-00014069

THIS ENROLMENT FORM MUST BE COMPLETED IN FULL WITH BIRTH CERT & IMMUNISATION DOCUMENTS ATTACHED

Family Reference Number		Child's Reference Number	
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PARENTS/GUARDIANS

Primary Parent or Guardian			Spouse or Guardian		
Given Name	Last Name	Date of Birth	Given Name	Last Name	Date of Birth
Address			Address		
Contact Numbers	Home: Mobile: Work:		Contact Numbers	Home: Mobile: Work:	
Drivers Licence Number			Drivers Licence Number		
Employer			Employer		

Family email address:

CHILD'S DETAILS

Given Name	Middle	Last name	Gender	Male Female (please circle)
			Religion	
Date of Birth			Language/s spoken at home	
Address			START DATE	

DETAILS of CARE REQUIRED

Days	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY
Please Tick					

PERSON AUTHORISED (NOMINEES) OTHER THAN PARENT (Emergency Contact)

Name	Address	Phone No	Date Applied	Authorised By

1. To deliver or collect the child to and from the childcare centre
2. To give consent to medical treatment or to authorise to administer medication to their child
3. Able to authorize an educator to take the child outside the education and care services premises.

ADDITIONAL PARENTS/GUARDIAN DETAILS

Name	Phone Number	Date Applied	Authorized By (enrolling parent to sign to authorize)

Details of Guardianship and custody terms of any specific custody or access provisions including child's residence or the child's contact with a parent or other person as per court order must be made available to the Centre to avoid any inconvenience to all concerned.

Two separate enrolment forms will be required from each parent if they have different family reference numbers and are intending to pay for the child separately. A copy of the details of all custody terms or arrangements must be provided in WRITING for staff to adhere to.

MEDICAL INFORMATION - CONFIDENTIAL

Medicare No		Ambulance Membership No	
Family Doctor's Name		Phone No	
Address		Private health cover	

Medication (Prescribed and otherwise) cannot be administered by any of the Care Givers without parent or Parent's nominee's written permission. Forms are provided for this purpose. As an ongoing precaution, we request parents to inform the centre at once if your child develops any new allergies. Before entering Child Care a child must be fully immunised or provide a letter from the doctor in relation to this matter.

PRESENT HEALTH

DOES YOUR CHILD HAVE: *(please circle)*

Hearing disabilities	YES / NO	Any additional needs	YES / NO
Eyesight disabilities	YES / NO	Any behavioural issues	YES / NO
Skin Disorder	YES / NO	Is your child immunized (please provide copy)	YES / NO
Any specific health/development conditions (please specify)			

CULTURAL & RELIGIOUS NEEDS

Dietary	
Cultural and religious needs	

ALLERGIES & ASTHMA

Does your child have any allergies? If yes please specify here:	YES or NO
Does your child have asthma? If yes please specify details here:	YES or NO

If you answered Yes to any of the above you will need to provide an action plan from your doctor before your child can commence care.

GENERAL AUTHORISATIONS

Agreement & Consent to Terms & Conditions Must be signed

Child's Name: _____ Date of Birth: _____

Terms and Conditions

Emergencies

In the event of an emergency, illness or accident while in our care (when the Centre is unable to contact the Parent / Guardian or the Authorised Contact/s), I / we give the staff at the centre consent to seek further Medical or Hospital attention for our child. Furthermore I / We agree under regulation 102, 161 of the Education and Care Service National Regulation 2012 to pay any expenses incurred for Medical treatment and for the child to be transported by ambulance.

Administering of Paracetamol

If my/our child presents with a fever above 39°C, I / We give permission for one dose of Paracetamol to be given. Verbal permission will still be sought but I/we agree for an executive decision to be made to administer the Paracetamol in the event that we/the emergency contact person cannot be contacted. I/We understand however that the child will need to be collected ASAP.

Administering of other Medication

I/We understand that no over the counter medication except for in an emergency, will be able to be administered to any child while at the service. I/We accept that while a child is on antibiotics, they will not be able to attend the centre until they have completed the course, unless antibiotics have been prescribed as a precautionary measure post-surgery. The reason for antibiotics will need to be clearly stated in a letter by the doctor who has prescribed the medication.

Permission for Publication

I / We hereby give consent for our child's photograph to be used for the room programming, Centre display boards, Facebook, Website and newsletters.

Permission for Observation

I / We give permission for our child to be observed and photographed by centre staff, in order to document their learning.

Payment of Fees

I / We agree to maintain our fees as per the centre's fee policy. We will ensure our fees are kept up to date by making payments on the required day via Ezi-Pay as agreed with the Centre. I / We are aware that failure to pay due fees within 7 days may result in the cancellation of care at the Centre's option. Where an Ezi-Pay (direct debit) arrangement has been entered into, I/we authorize the centre to make withdrawals from my/our nominated account as specified in the Direct Debit Request Form, I/we acknowledge that this is the chosen method of payment collection by the centre and agree to its terms as stated in the terms & conditions on the direct debit request form. I/we acknowledge that such withdrawals may include amounts representing any arrears that are owed by me/us. I / We understand that any costs, including penalties, interest on outstanding amount together with collection agency costs incurred by the centre in collecting any arrears owed may be charged to my/our account.

Permission for Evacuations and excursions

I / We hereby give permission for our child to participate in regular evacuation drills. I / We understand that our child will be relocated from the Centre under the supervision of their Educators and centre staff to a safety zone for evacuation purposes. I/We give permission for our child to go on regular visits to Woodhouse Park (please see Authorisation form for more details in each room).

Child Care Subsidy

I / We understand that it is our responsibility to notify the Centre of our Customer Reference Numbers (CRNs). I/We understand that if our child does not attend the centre during their last two weeks of care after providing 4 weeks written notice with the intention of terminating care, full fees will be charged, this is known as Cessation of Care. The outstanding money will be debited via Ezi-Pay.

Sunscreen Application

I/We agree to apply sunscreen on our child before arriving at the service each day. I/We give permission for staff to apply additional application of sunscreen during the day. I / We understand that the service may use a variety of SPF 30 sunscreen brands from time to time. If my child requires special sunscreen I/we agree to supply this product. I/We agree to dress our child in clothing that provides adequate sun protection during summer. I/we understand that there is a **NO HAT NO PLAY** Policy and will need to provide an approved sun safe hat (**not caps**), each day that our child attends.

Centre Policies

I / We acknowledge that the Centre Policies are always available to view in the foyer. I / We understand that any changes to these policies will be carried out where appropriate in consultation with us as Parents / Guardians and any changes to these policies will be documented and updated in the policy and procedure file.

Fees for Public Holidays & Sick Days

I / We understand that **Public Holidays & sick days are charged at the normal daily fee rate**. If your child is normally booked in for that day full rate will still apply. **No days** will be swapped or exchanged.

Late Fees

I / We understand that late fees will be charged if our child is not collected by the advertised closing time, and that no Child Care Support can be claimed for this fee. Late fees charged are as follows: \$4 per minute for each minute that your child has not been collected after 6pm closing time. At the discretion of management this fee can be increased to \$8 per minute for families that regularly collect their child after 6pm.

Enrolment fee

I / We understand that in order to reserve a spot for our child/ren, a two-week advance payment and a \$75 enrolment fee must be made on enrolment. This is a non-refundable payment if for any reason the child does not commence care.

Priority of Access

I / We understand that if our family falls under Priority Access we may be required to alter our days or give up our place in the Centre in order to provide a place for a higher Priority family according to the following Priority Access Guidelines and our Centre Policy: First Priority – children at risk or serious abuse or neglect; Second Priority – children whose parents satisfy the work, training and study guidelines specified by the Government; and Third Priority – all other children.

Infectious Conditions & Other Health Issues / Clearance Certificates

I / We understand that our child will be excluded from the Centre if they contract a contagious illness or condition and will not be accepted back into the centre without a 'clearance certificate' issued by a Medical Practitioner. I/We understand that if the child is sent home with a fever, diarrhoea or vomiting that they will be excluded for 24 hours after the last symptom, unless there are 2 or more cases then the exclusion period will increase to 48 hours.

Allergies/other health issues

I / We understand that our child's photo and allergy/food intolerance information may be displayed in the centre to ensure all educators and staff are aware of our child's health needs.

Non -Immunisation

I / We understand that if our child is NOT immunised in accordance with the Government requirements, they will not be able to be enrolled at our Centre without a supportive letter issued by a Medical Practitioner. I/We understand that our child will need to be monitored at home for 24 hours after an immunisation/vaccination for possible adverse reactions.

Presence of Visitors and Volunteers

I / We understand that occasionally the Centre may have visitors and/or volunteers assisting in the Centre. I / We consent to our child being in the presence of visitors and/or volunteers under the Centre Staff supervision.

Confidentiality of Enrolment Records

I/We understand that information in the child's enrolment record remains confidential unless necessary for the care or education of the child, to manage medical treatment, or where requested by the Education & Care Regulatory Authority, Child Protection or Police.

Face Painting/Messy Play

I/We agree to my child having their face painted on special occasions. I/We agree for our child to participate in messy play activities.

Children's Holidays

I/We understand that we are entitled to 4 weeks of holiday rate per year, as per our child's booking, This will apply only if I/we provide **2 weeks written** notice to management. This discount is only available to families that have attended for a period of three months or more.

No Public Holidays can be included in the Holiday Rate which will be charged at normal rates.

CCTV

The use of CCTV will be for management monitoring only. No parents will be allowed to view any footage or have recordings of footage due to confidentiality of children and staff alike.

By signing this form, I/we declare and confirm:

- That it is an offence under Regulation 191 of the Education and Care Service National Regulations 2012 for giving any false or misleading information and documentation to the provider.
- That I / we are lawfully authorised in relation to the Child referred to in this Enrolment Form
- That I/we further state that all information, and documentation provided within this Enrolment Form is true and correct; and
- That I/we have read, fully understand and agree to comply with all terms and conditions listed above.

	Signature	Date
Primary Parent/Guardian		
Secondary Parent/Guardian		

INITIAL 2 WEEK ADVANCE PAYMENT

Cash payment	
Eft payment	
Take out via Ezi Pay	

How did you find out about our Centre? *(Please tick)*

Website		FaceBook	
Referral from Parent at centre		Other (please specify)	



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Dear Parent/guardian

You need to provide the following to secure your enrolment for your child:

- 1) Completed Enrolment Form
- 2) A copy of your child's birth certificate or passport
- 3) An up-to-date record of your child's immunisations
- 4) Completed direct debit authority form
- 5) 2 weeks advance fee payment (centre management will advise the amount you will need to pay). **Refunds will not be given on this amount if parents choose not to go ahead with the booking.**

It is your responsibility to contact the Family Assistance Office in regard to your eligibility for childcare support. The contact number for Family Assistance Office is 13 61 50.

Please note: You will also be charged a once off \$75 administration fee for an individual online portfolio and documentation for your child. Our Opening Hours are: 7am-6pm

What should I bring in for my child?

Room	To bring daily
Nursery (0-2 years)	6 Nappies, clean bottles either made for the day or formula in separate containers ready to mix. Any comforters & 2 sets of clothing & Hat
Toddlers (2-3 years)	5 Nappies, any comforters, water bottle & 2 sets of clothing & Hat Sippy cups rather than bottles for weaning process.
Pre Kindy (3-4 years)	1 set of clothing, hat & water bottle.
Kindy (4-5 years)	Change of clothing, water Bottle & hat

Please Clearly mark all your child's belongings staff are not responsible. Parents must take their child's belongings home at the end of each day e.g., hat & water bottle.

Kind regards
Danielle De Cinque