

Pandas RE-Enrolment Form2019 (Private & Confidential)

Pandas C.C.C.

Family Information

Child's Full Name:

Date of Birth:

CRN:

Gender: M F

Child's Address:

Parent / Guardian 1:

CRN:

Parent / Guardian 2:

Address:

DOB:

Email

Home Phone:

Health Card:
Yes / No

Address:

Mobile:

Medicare Card:

DOB:

Occupation:

Occupation:

Work Phone:

Home Phone:

Mobile:

Work Phone:

Email Address:

Have you registered with Centrelink?

YES / NO

Family Doctor:

Address:

Contact No:

Booking Information

Days Required:

Monday

Tuesday

Wednesday

Thursday

Friday

Reason for enrolment:

Is your child attending another service?

YES

NO

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If yes; Does the service offer an approved kindergarten program?

YES

NO

Emergency Contacts

Emergency contacts and authorized persons to collect your child from the centre and able to prescribe any medication's:

Name:

Relationship:

Address:

Contact No:

Name:

Relationship:

Address:

Contact No:

Special Considerations

Nationality:

Is your child of Aboriginal or Torres Strait Islander origin?
Islander

NO

YES, Aboriginal

YES, Torres Strait

Language spoken at home:

Are there any special cultural/religious requirements?

Are there any court orders affecting the child enrolled? (If yes provide documentation)

YES

NO

Does your child any allergies, including whether the child has been diagnosed as at risk of anaphylaxis or asthma? YES

NO

(Please attach action plans)

Does your child have any additional needs or disabilities?

Does your child attend any specialist agencies?

Is your child Immunised (Please attached up to date print doctor transcript)? Yes/No Admin Sighted: Yes/No

Date:

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Centre Agreement	Parent / Guardian Signature
1. I have read the Centre Handbook and agree to abide by the centre's policies and procedures as set out in the handbook and as discussed with the Nominated Supervisor.	
2. I agree to pay fees a week in advance; this is to be made by direct debit. Accounts can be paid weekly or fortnightly as long as it remains at least one week in advance at all times.	
3. I understand and accept that fees are payable for absences such as illness and holidays and that fees must be paid on time. I also understand that failure to pay fees on time could jeopardize the child's continuing enrolment at the centre.	
4. I agree to give two weeks notice of intention to change booked days or withdraw the child from the centre. I agree to pay two weeks fees in lieu notice, if two weeks notice is not given.	
5. I agree to ensure the child will be brought and collected by an adult (18yrs and over) and to sign the child in and out each day of attendance. I agree to give the centre notice if another person will be collect the child and will inform the persons collecting the child to present identification at the centre.	
6. I understand that staff at the centre will take every precaution to ensure the safety of the child. In the event of an accident / incident occurring to my child, I give permission for centre staff to administer first aid and in an emergency, call an ambulance or emergency medial / dental treatment.	
7. I agree to abide by the centre's medication policy, by providing a doctor letter or prescription outlining the medication, dosage, administration times and the child's name. I also agree to complete a medication form and inform the staff about the required medication.	
8. I understand and agree to abide by the centre medication policy; that the centre does not administer Panadol or any other non prescribed medication, in the event of the child having a high temperature or becoming ill the centre will contact parent / guardian to collect the child.	
9. I agree to keep children at home if he / she is suffering from any contagious conditions or is generally unwell and therefore unfit to participate in the normal daily activities of the centre. I agree to collect the child promptly if the child becomes unwell while at the centre.	
10. I give permission for the child to have sunscreen, (broad spectrum 30+) supplied by the centre, applied. If your child has sensitive skin your may provide more suitable sunscreen or if you don't want the child to wear sunscreen at all please write: no sunscreen permitted and sign.	
11. I agree to abide by the centre sun safety policy and provide a hat and assure the child is dressed appropriately (e.g. sleeved shirt, no singlets) each day of attendance.	
12. I give permission for the child to participate in monthly fire / emergency evacuation drills. I understand that due to safety precaution the children leave centre premises.	
13. I give permission for the child to have their photo/video taken in group/individual experiences. The photo/video may be shared with other families in the service on stroypark.	
14. I have read and signed all the permissions and conditions set out in this enrolment form.	
Name:	Sign:
Date:	