



Enrolment Form

1. FAMILY DETAILS

Child's Surname:	Gender: Male / Female
Child's First Name:	Date of Birth: Language spoken:
Child's Home Address:	Suburb: Postcode:
Mother's Full Name	Occupation: Culture:
Home Address: (if different from above)	Home Phone No:
Work Name:	Work Phone No:
Date of birth: Language spoken:	Mobile No:
Father's Full Name:	Occupation: Culture:
Home Address: (if different from above)	Home Phone No:
Work Name:	Work Phone No:
Date of Birth: Language spoken:	Mobile No:
Email Addresses to receive newsletters and statements:	
Name & ages of other children in family:	
Family Centrelink number (usually mum)	Child's Centrelink number

Date of Birth of parent who is claiming CCS for child _____

Driver's license number of parent _____

Sighted by STAFF: Name: _____/Signature _____

2. AUTHORISED NOMINEES

Authorised nominee means a person who has been given permission by the parent or family member to collect the child from the education and care service (Happy Days Preschool and Long Day Care) educator.

An authorised nominee is an acknowledged person who (over the age of 18 years), with the parents/guardian's authorisation is given permission for the following:

- Authorise the taking of my child outside the service by an educator of Happy Days Preschool
- Consent to medical treatment of the child:
- Request or permit (sign in) the administration of medication for my child:
- Dropping off and collecting my child:
- Emergency contact: There may be times when your child has an accident, trauma or illness and the parents or guardians cannot be contacted. To deal with these situations Happy Days will notify one of the authorised nominees.

We recommend that these Authorised nominees live/work within 30 minutes of Happy Days Preschool and are made aware of the permission you have given them in relation to your child.

PERSON 1	PERSON 2
Full Name: _____	Full Name: _____
Address: _____ _____	Address: _____ _____
Telephone/s: _____ _____	Telephone/s: _____ _____
Relationship to the child: _____ _____	Relationship to the child: _____ _____

These Authorised Nominee's will need to bring photo identification.

Parent Name: _____ Signature: _____ Date: _____

3. COLLECTING THE CHILD FROM HAPPY DAYS PRESCHOOL

Your consent is required for other people (over the age of 18 years) to collect your child from Happy Days Preschool and long day care on your behalf. Please list the details of people (other than, the Authorised Nominee's listed above, who can collect the child in the table below.

PERSON 1:	PERSON 2:
Full Name: _____	Full Name: _____
Address: _____ _____	Address: _____ _____
Contact No: _____ _____	Contact No: _____ _____
Relationship to the child: _____ _____	Relationship to the child: _____ _____
PERSON 3:	PERSON 4:
Full Name: _____	Full Name: _____
Address: _____ _____	Address: _____ _____
Contact No: _____ _____	Contact No: _____ _____
Relationship to the child: _____ _____	Relationship to the child: _____ _____

Parent Name: _____ Signature: _____ Date: _____

3. DAYS ATTENDING

Please indicate below, including time of care required: We arrange staff according to children booked in hours so please adhere to the hours chosen.

Routine care weekly arrangement. Casual care may be organised from time to time if parent requests.

Monday	From:	A.M	To:	P.M
Tuesday	From:	A.M	To:	P.M
Wednesday	From:	A.M	To:	P.M
Thursday	From:	A.M	To:	P.M
Friday	From:	A.M	To:	P.M

4. IMMUNISATION, BIRTH CERTIFICATE AND CHILD'S HEALTH RECORD

We need a current copy of your child's current **ACIR Immunisation History Statement** for our records to complete your enrolment. **No child can attend Happy Days until their ACIR immunisation details are on file.** To ensure the safety of all our children, it is the centre's policy to exclude any child who has not been fully immunised during an outbreak of a disease. (An outbreak is one reported case in the centre.) **Fees are still payable during this exclusion time.**

Please bring your child's Health record to be sighted by a staff member.

Date Sighted: _____ **Staff Member details:** _____

Please also provide a copy of your child's BIRTH CERTIFICATE.

5. MEDICAL INFORMATION

I authorise the Happy Days Preschool and Long Day Care, Approved provider, nominated supervisor or Educator to seek:

- Medical treatment for my child from a registered medical practitioner, hospital, or ambulance service; and
- Transportation of my child by an ambulance service.

If required during the time my child is in attendance as Happy Days Preschool and Long Day Care.

I am aware that there may be cost involved in seeking such services and I agree to take responsibility for any cost (fees) resulting in such treatment.

Parent Name: _____ **Signature:** _____ **Date:** _____

Medicare number:	Private Health Fun and number:
Name of family doctor:	Phone Number:
Name of family dentist:	Phone Number:

6. GENERAL MEDICAL AND FAMILY INFORMATION

Does your child have **any medical conditions or allergies**, including anaphylaxis, food allergies? E.g. Epilepsy, Asthma, Ear infections, food colourings, etc?

If your child has a medical condition you must make an appointment to fill out a **medical risk minimisation plan and communication plan** before child can attend. Please speak with a staff member to arrange a time suitable to complete this form.

Does your child require any prescribed medicines? If so, what is it?

You will need to complete our "Medication's Record." In case your child requires medication while in our care. The medication will need to have your child's name on a medical label from the pharmacist to be signed in for administration.

Does your child have any special dietary requirements?

Do you have any cultural/religious beliefs in relation to food handling or preparation?
Eg Halal If so please specify

Has your child experienced any language or speech difficulties, physical problems, etc? **Yes / No**
If "Yes" please provide details.

Do you have any concerns about your child's development at present?
Eg. Tantrums, shyness, clumsiness, speech, etc?

Has your child previously attended a Pre-School or a Long Day Care Centre? **Yes / No**
Where: _____

Or will your child be attending another Centre as well as Happy Days? **Yes / No**
Name of centre and hours booked: _____

Do you have any other children attending Family Day Care, After School Care or Long Day Care? **Yes / No**
(If "Yes" it may affect your Child Care Rebate percentage)
Name of Centre: _____

Child's Family & Cultural background

Are any languages other than English spoken at home? **Yes/No.** If "Yes" which? _____

Is there any aspect of your culture you would like us to be aware of?

Is there anything else you feel is important to tell us? E.g. Family situation, recent events, and religious beliefs, etc

Please help us by providing an insight into your child’s ethnical or cultural background.

Is there any event or activity at Happy Days that may clash with your value or beliefs?

7. COURT ORDERS, PARENTING ORDERS AND PARENTING PLANS RELATING TO THE CHILD

Are there any court orders relating to the powers and responsibilities of the parents in relation to the child or access to the child?

- NO Go to next section
- YES Please complete the following

The nominated supervisor will need to be made aware of;

- Details of any court orders, parenting orders or parenting plans relating to powers, duties, responsibilities, or authorities of any person in relation to the child or access to the child; or
- Details of any other court orders relating to the child’s residence or the child’s contact with a parent or other person.

The nominated supervisor will need to see the **original** court order/s and attach a copy to this enrolment form.

Please describe changes the court orders have made relating to your child: _____

Parent Name: _____ Signature: _____ Date: _____

8. EMERGENCY ADMINISTRATION OF PANADOL

I authorise the staff of Happy Days to administer one emergency dose of “child strength” Panadol to my child. I understand that ONE DOSE ONLY will be given on any one day, and that the “child strength” Panadol will only be given if my child’s temperature reaches **38 degrees Celsius**, and that all efforts to contact parent/s and emergency contacts have failed.

If my child’s temperature fails to drop or goes up again, I understand that emergency medical attention will be sought for my child. The dosage of Panadol will be given in accordance with the manufacturer’s instructions or on the verbal advice of a Medical Practitioner.

Please note that children who are feverish and unwell should not be left at the Centre, they need to be cared for at home.

Signature: _____ Date: _____

9. INSECT SPRAYS

I give permission for staff of Happy Days to apply insect spray/ anti itch / Stingos to my child if needed.

Signature: _____ Date: _____

10. HEAD LICE CHECK

From time to time children may contract head lice. Children play closely along side others and lice spread easily. To break the chain of infection we need to ensure every child who has head lice is treated. We ask that parents diligently check their child’s head each week for head lice. We at preschool will also be diligent and check a child who shows signs of head lice. I authorise staff to check my child if he/she is showing signs of having head lice.

Signature: _____ Date: _____

11. FEES

I understand that I am responsible to pay my child's fees, including absences, WEEKLY via direct credit and that my child's/children's place at Happy Days will be jeopardised if my fees become overdue.

If I do not pay fees, I understand that I am liable to pay the centres recovery costs as well as any fees owing. I understand that two weeks notice must be given to the Centre administrator of reducing days or withdrawing my child from the centre.

Your child's daily fee is \$ _____

Parent Name: _____

Signature: _____ Date: _____

12. EXCURSIONS AND RISK ASSESSMENTS

As part of our program the educators and children regularly visit places in our local community on excursions. For a regular outing, authorisation is only required to be obtained once every 12 months (Reg 102). We have listed below the places that we visit regularly within walking distance of Happy Days preschool. An excursion form for families to sign detailing the information about each excursion will be completed before the children are taken on regular outings. A risk assessment has been developed for each excursion and notice of the excursion will be displayed on the morning of each excursion.

Please tick the destinations you give permission for your child to be included in (an excursion form will be signed by parents and attached to this enrolment record.)

- Bush reserve at the rear of our centre (100 metres from the back gate)
- Harry Bailey Memorial Library (Cnr Coff and Duke St, Coffs Harbour)
- Coffs Harbour Regional Gallery (Cnr Coff and Duke St, Coffs Harbour)
- Fitzroy Oval and Coffs Creek walkway
- North Coast Regional Botanic gardens (Cnr Coff St and Hardacre St, Coffs Harbour)
- Coffs Harbour Regional Museum – (Harbour Drive, Coffs Harbour)
- Brelsford park (opposite Happy Days)
- Waratah House Respite Centre (just behind the centre)
- Coles on Harbour Drive (two doors down)
- Salvation Army Family Store- Op Shop (Harbour Drive)
- Big Country meats- butcher (Harbour Drive)

Signature: _____ Date: _____

13. MEDIA CONSENT FORM

As part of our program we take photographs, video, or sound recordings of the children as part of our program planning and documentation. This information can be used in either, in full or in part, in conjunction with any wording or artworks for the following purposes. Please tick all that you authorise Happy Days staff to use with images of your child.

- Displays within the child's room
- Displays within the centre
- To share with other families E.g. Sending the Weekly Reflections via email, or through an approved app, to all families of children present that day.
- Within the Centre's Newsletters
- On the Centre's website
- On the Centre's Facebook page
- Within promotional materials
- Within the media E.g. Local newspaper

Information for the Primary Caregiver:

I understand that the above forms of media may be accompanied by my child's first name and the first letter of their last name (in the event of 2 children having the same first name). I understand that it is my responsibility to update this form in the event that I no longer wish to authorise one or more of the above uses. I agree that this form will remain in effect during the term of my child's enrolment.

Parents

Signature: _____ Date: _____

14. KEPT ME APPROVED APP

To display and send the photos and videos, weekly reflection of our programs, reports, and developmental records, we use an app called KeptMe. To use this app, we need your consent and information to register your child into the app.

I, _____ (print your name) as the parent or legal guardian authorise staff to capture images and information pertaining to _____ (child's name) for the purposes of documenting my child's educational journey using the KeptMe service.

I understand that photos/information/footage captured by educators may include other individuals, for example, other children interacting with my child, in these cases, I agree not to share or distribute these photos in the interests of other children's privacy.

Signature: _____ Date: _____

I authorise the following two people to gain access to KeptMe for the purposes of accessing the above, named child's information (provide email addresses of authorised users.):

1. _____
2. _____

In the next few days, the above people will receive a registration email sent from KeptMe, together with some information explaining how, to access the service. It is important that these links are not shared with anyone else as they offer exclusive access to each parent. For security reasons, these registration links will only remain active for a few days.

ACKNOWLEDGEMENT FORM

I, the parent/guardian agree that the information provided in this Enrolment Form is true and correct and will be relied upon by Happy Days Pre-School Pty Ltd.

The parent/guardian agrees to notify Happy Days immediately should there be any change in circumstances from the details outlined in the Enrolment Form, including living arrangements of the child and/or parent/guardian within 7 days of such a change.

Terms of payment are explained in the information booklet and will be strictly adhered to. A cancellation fee may apply at the discretion of Happy Days.

The parent/guardian agrees to pay outstanding Childcare fees and Cancellation Fees where applicable together with all Debt Recovery expenses including Mercantile Agents' fees, court costs and legal fees reasonably incurred by Happy Days.

In the case of a default the parent/guardian acknowledges that any Enrolment information specifically required for the purpose of debt recovery and identification of individuals in default may be forwarded to Childcare Credit Reference for recovery action.

I understand that in the case of a default on payment for Childcare Fees, enrolment details may be listed on the Nation Default Registry for a period of six (6) years and 30 days or until paid. This information may be accessed by other care providers at the time of enrolment.

The parent/guardian acknowledges that care may be refused in the case of a default.

Signature of Parent/Guardian.

___/___/___
Parent/Guardian's Date of Birth

Signature of Parent/Guardian.

___/___/___
Parent/Guardian's Date of Birth

Name(s) of Child/Children.

PRIVACY STATEMENT

Happy Days Preschool & LDC is required to collect personal information from staff and parents about child/ren, and families, before and during the course of a child's enrolment or educators' employment in our Service. We are committed to protecting your privacy and we abide by the National Privacy Principles contained within the Privacy Act 1988. Privacy of your personal information is important to us and we conduct our business with respect and integrity. Happy Days complies with the Australian Privacy Principles (APPs) (2014). You are able to gain access to and update your information upon request. Please contact us should you need to do this.

What information do we collect, why and how it is used?

Basic details are required to enroll your child to meet our Education and Care Services National Regulations 2011 and to provide the best possible individual care for your child and for processing payments. Some of the information we collect is to satisfy the services legal obligations under the National Regulations.

The Education and Care Service from time to time may disclose personal and sensitive information to others for administrative purposes. This includes to the:

- Early Childhood Education and Care Directorate,
- NSW Department of Education, Early Childhood,
- Family Assistance Office,
- Department of Health,
- Family Law Court
- Other Education and Care Professionals.

Naturally, much of this information is of a personal nature and some of it might be regarded as 'sensitive' and not the sort of information that you would wish to have unnecessarily disclosed to others.

We assure you that:

- This information will only be used by our Educators and other Staff members in order to deliver your child's care to the highest standards.
- It will not be disclosed to those not associated with the care of your child without your express consent.
- You may ask to seek access to information held about you and your child and we will provide access without undue delay.
- This access might be inspection of your child's records or by providing copies of the information.
- We will take reasonable steps to ensure at all times that the details we keep about your family are accurate, complete, and up to date.
- We will take reasonable steps to protect this information from misuse or loss and from unauthorised access or disclosure.
- Our Educators and other Staff are committed to respect these principles at all times.
- If a student has a valid training requirement, that involves the gathering of certain information pertaining to your child or family, the student must have written consent from the parent/guardian and the Approved Provider/ Nominated Supervisor.
- All documentation will be stored in safe and secure area at Happy Days Preschool & LDC.
- Happy Days complies with the Payment Card Industry Data Security Standards (PCIDSS) when handling credit card transactions and securely stores all credit card information for Direct Debit or credit card payment/eftpos payments in accordance with the Fees policy. For detailed information about the legislation go to the Federal Privacy Commission website: www.privacy.gov.au

If you have any concerns or questions about the way your personal information is being managed please contact the Approved Provider/ Nominated Supervisor on 6652 6620 or Happy-days@bigpond.com

This service is committed to maintaining all personal information provided by its children, families, staff, management, volunteers, students, and community in accordance with our Privacy Policy and the Australian Privacy Principles.