WINGATE AVENUE COMMUNITY CENTRE - OCCASIONAL CARE CENTRE

ENROLMENT DETAILS Commencement Date: / /2021
Registration No:.....Facsia No:.....

A parent or guardian who has lawful authority in relation to the child must complete this form. A brief explanation of lawful authority is found at the end of this form. The licensed children's services must collect the child's enrolment information in this form, as required by the Children's Services Regulations 31 to 35. Questions marked with an asterisk * are not required by the Regulations, but you are encouraged to answer these to assist the service in caring for your child.

INFORMATION ABOUT THE CHILD

Family Name: Date of	Birth: CRN:#						
Given Names:Usually	v called: Gender:* M □ F □						
Home Address:							
Cultural Background: Medicare Number: Medicare Number:							
Language(s) spoken at home:							
*Is the child of Aboriginal and/or Torres Strait Islande □ No, not Aboriginal or Torres Strait Islander □ Yes, Aboriginal and Torres Strait Islander	r origin? _(please tick) □ Yes, Aboriginal □ Yes, Torres Strait Islander						
INFORMATION ABOUT THE C	HILD'S PARENTS OR GUARDIANS						
Mother / Parent 1	Father / Parent 2						
Full Name	Full Name						
Date Of Birth:#	Date Of Birth:#						
CRN:#	CRN:#						
Claiming parent for Centrelink FTB No Yes	Claiming parent for Centrelink FTB No Yes						
Email:	Email:						
Address - as per child or:	Address - as per child or:						
Telephone/s: (mobile)	Telephone/s: (mobile)						
(other)	(other)						
Does the child live with the Mother/Parent 1? No □ Yes □ (please tick)	Does the child live with the Father/Parent 2? No □ Yes □ (please tick)						
Country of Birth:	Country of Birth:						
Guardian (if applicable)	Guardian (if applicable)						
Name	Name						
Address - as per child or:	Address - as per child or:						
Country of Birth:	Country of Birth:						
Telephone/s: (mobile) (other)	Telephone/s: (mobile) (other)						
Does the child live with this guardian?	Does the child live with this guardian?						
No □ Yes □ (please tick)	No □ Yes □ (please tick)						
Main reason for enrolment:	☐ Occasional Care ☐ Class at Wingate						
Do you agree to Photos/Videos being taken by:- Staff Other parents							
Where did you hear out about Wingate Avenue	Community Centre – Occasional Care:						

CONFIDENTIAL OTHER PERSONS TO BE NOTIFIED

There may be times when the child has an accident, injury, trauma or illness and the parents or guardians cannot be contacted. To deal with these situations the children's service should notify one of the following people who are authorised to collect and care for the child after accident, injury, trauma or illness.

This person is authorised to consent to medical treatment of, or to authorise administration of medication to the child; and is authorised to authorise an educator to take the child outside the children's service premises.

Consent to the medical treatment of the child, for the approved provider, a nominated supervisor or an educator to seek medical treatment for the child from a registered medical practitioner, hospital or ambulance service; and transportation of the child by an ambulance service.

Name	Name
rane	Name
Address	Address
Address	Address
Telephone/s: (mobile)	Telephone/s: (mobile)
releptioners. (mobile)	relephone, (meshe)
(other)	(other)
\ /	\ /
Relationship to Child	Relationship to Child
relationship to orma	relationer to or ma

COLLECTING THE CHILD FROM THE CHILDREN'S SERVICE - This may be changed throughout the year.

Your consent is required for other people to collect the child from the children's service on your behalf.

Please list the details of those people who can collect the child in the table below.

In the event that the child is not collected from the children's service and the parents or guardians cannot be contacted, this list will be used to arrange someone to collect the child. If contact cannot be made with those listed Victoria police will be called.

Name	Name
Address	Address
Telephone/s: (mobile)	Telephone/s: (mobile)
(other)	(other)
Relationship to child:	Relationship to child:
Name	Name
Address	Address
Telephone/s: (mobile)	Telephone/s: (mobile)
(other)	(other)
Relationship to child:	Relationship to child:

COURT ORDERS 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 \square go to the next section.

Yes □ please complete the following:

- 1. Bring the **original** court order/s for staff to see and a copy to attach to this enrolment form;
- 2. If these orders:
 - a) Change the powers of a parent/guardian to:
 - authorise the taking of the child outside the service by a staff member of the service;
 - consent to the medical treatment of the child;
 - request or permit the administration of medication to the child;
 - collect the child, AND/OR
 - b) give these powers to someone else,

Please describe these changes and provide the contact details of any person given these powers:

CONFIDENTIAL CHILD'S MEDICAL AND HEALTH INFORMATION

Name Doctor/Medical Service:		Telephone:							
Address Doctor/Medical Service:									
*Maternal & Child Health (MCH) Centre:									
*Ambulance Subscription:	No □	Yes □	*Health Care card	:t	No □	Yes			
* Does your child have any additional needs, developmental delay or disability? No \Boxed Yes \Boxed (please tick) Including intellectual, sensory or physical impairment If yes please provide details of any additional needs and any management procedures to be followed:									
* Please list any agencies involved e.g. (speech pathology, physiother		•							
Does the child have any medical corelevant to the children's service? If yes, the following management produces:			N	No 🗆 Y	es □	(please tick)			
Does the child have any dietary res (e.g. Meat, Peanuts, Dairy, Halal) If yes, the following restrictions apply:		?	١	No□ Y	′es □ (ple	ease tick)			
Does the child have any allergies of the state of the sta	or sensitiv	vity?	I	No □ Y	es 🗆 (pl	ease tick)			
*NOTE – If your child has been diagnosed with Asthma, Epilepsy, Seizures or Allergies a meeting between yourself and the childcare manager must be arranged prior to commencement.									
ANAPHYLAXIS									
Has your child been diagnosed at r Does your child have an auto injection Has the anaphylaxis medical manager Has a risk management plan been cor	n device (e ment plan	eg EpiPen® been provi	(i)? ided to the service?	h you?	No 🗆 No 🗆 No 🗆	Yes □ Yes □ Yes □ Yes □			
In the case of anaphylaxis you will be prov provide the service with an individual medi your child. This will be attached to your chi www.education.vic.gov.au/anaphylaxis	ical manage	ement plan t	for your child signed by	the medic					

CHILD'S IMMUNISATION RECORD

No Child is permitted to attend childcare until immunisation records have been received or "Grace period eligibility assessment' has been approved by staff at Wingate community centre

Has the child been immunised? No □ Yes □ (please tick) If yes, provide the details by:	
 attaching the Child History Statement from the Australian Childhood Immunisation Regis attaching a immunisation status certificate from a Medical doctor 	iter OR
Does your child have a health record? No ☐ Yes ☐(please tick) If Yes, please provide for sigh Child health record means a record that documents a child's health and development assessi immunisations. (In Victoria it is a green book)	-
NamePosition Name and position of person at the children's service who has sighted the child's health record.	
OTHER INFORMATION	
Is there anything else that the children's service should know about the child? eg: Siblings(names & ages) excessive fears, likes & dislikes, favourite activities, other early cl service etc.	
DECLARATION AND CONSENT TO EMERGENCY MEDICAL TREATMEN	IT
l,(Print full nam	ne)
Declare as the person with lawful authority of the child referred to in this enrolment form that the informati true and correct and undertake to immediately inform the children's service in the event of any change to information.	
 declare that the information in this enrolment form is true and correct and undertake to immedinform the children's service in the event of any change to this information; 	ediately
 agree to collect or make arrangements for the collection of the child referred to in this enroln s/he becomes unwell at the service; 	nent form if
 consent to the staff of the children's service seeking, or where appropriate, administering, so emergency medical treatment as is reasonably necessary and that I will reimburse any necessary expenses incurred by the children's service. 	
Consent to staff taking my child outside of the premises in the event of an emergency	
Consent to the staff of the children's service to check my child/s head for head lice.	
 Understand that during the months of August to May, I will ensure that sunscreen has applied to my child by a parent/guardian before commencing each day at the centre. 	s been
Have read and I am aware of the Anaphylaxis Policy (available from childcare)	
Signature Date	

CONFIDENTIAL CHILDCARE BOOKING, PAYMENT PROCEDURE & COMPLYING WRITTEN AGREEMENT

- Your child's first session of care will be charged at the full fee and is payable before
 your first booking can be made; this will be refunded at the completion of care if your
 account is in credit. CCS will not be paid if you are absent on your first or last day of
 care
- CCS (childcare subsidy) will be applied to all accounts who provide the appropriate details required
- Reduced fee's will be paid at an estimated rate, if any account is underpaid the difference will be due
 within 7 days. If any account is over paid, your account will be credited for you to use at your
 convenience or refunded if written request is received.
- Once a booking has been paid for it cannot be changed or refunded
- Term bookings can be requested prior to beginning of term, Bookings are not confirmed until you are notified that your request was successful and payment has been received.
 Requests can be made at other times but may not be available
- Bookings can be made in the existing week or up to a week in advance.
- Single bookings made over the phone without payment must be paid in full before 5pm the same day unless the booking is for the following day, where the payment is due prior to entering the room
- My child is enrolled and will be attending childcare at Wingate Avenue Community Centre Occasional childcare, Childcare is provided Monday to Friday during the hours of 8.30am – 5.00pm on a casual basis.
- Hours of care used will be dependent on the sessions your child is booked in for.
- Our Current sessions and fee schedule is on display at the entrance and is available in the childcare handbook and on our website: http://wingateave.com.au/childcare
- By booking your child into a session (either over the phone or in person) you are confirming that you have committed to care on the agreed session booked into and will pay for that session.

Late arrival

If you are going to arrive later than 1 hour after the session commences you are required to call 9212 0236 and advise reception or childcare staff of a late arrival, otherwise your position may no longer be available if you arrive more than 1 hour late.

Cancellations

If your child will not be attending a session they are booked into, you are required to call the centre either the day before or prior to your booked session commencing, this allows staffing to be changed if necessary

Personal Belongings

It is the parents/guardians responsibility to make sure all of the child's belongings are clearly named and are collected at the end of each session. Centre Management will not take responsibility for the loss or theft of your children's belongings.(including hats, clothes, lunch boxes & drink bottles)

I	have	read	and	understood/	or had	explained	to me	the	'above'	complying	written	agreement,	booking,
p	aymei	nt, lat	e arri	ival, cancella	tion an	d personal	belong	ings	policies				

Name (please print):	
Signed:	Date:

Sun protection agreement and permission form

I understand Wingate Avenue community centre – occasional care follows SunSmart and Cancer Council Victoria recommendations to use a combination of sun protection measures (clothing, sunscreen, a hat, shade) during the daily local sun protection times (whenever UV levels reach 3 or higher), typically from mid-August to the end of April in Victoria.

I agree to help minimise my child's potential risk of skin and eye damage and skin cancer by doing the following:

(Please tick all that apply)

- ✓ Dress my child in cool clothing that covers as much skin as possible e.g. tops that cover the shoulders, arms and chest, has higher necklines or collars, and long shorts and skirts. I understand that singlet tops or shoestring dresses do not provide adequate sun protection and are best layered with a shirt or t-shirt.
- Remind my child to bring and wear a sun-protective hat that shades the face, neck and ears (e.g. wide-brimmed, bucket or legionnaire hat). I understand that baseball / peak style caps do not provide adequate sun protection and are not appropriate for outdoor play.

√ I will apply sunscreen to	my child/ren prior to attending or before leaving my child at childcare
sunscreen supplied by	cators/staff to apply SPF30 (or higher) broad-spectrum, water-resistant the service to all exposed parts of my child's skin including their face, required after 2.5 hours of the session commencement
by applying SPF30 (or h	educators/staff to assist my child to develop independent, self-help skills igher) broad-spectrum, water-resistant sunscreen to all exposed parts of their face, neck, ears and arms. (Recommended from ages three and
Child/ren's name:	
Parent/Guardian's name: (Please print)	
Signature of Parent/Guardian	
Date:	
NOTES:	

COMPLYING WRITTEN AGREEMENT (CWA)

l,	(Full name)
Of,	(Address)
Confirm that my child/ren	
Child's full name	Date of birth
Child's full name	Date of birth
Child's full name	Date of birth
Child's full name	
	Date of birth
Are enrolled and will be attending childcare at No. Occasional Childcare. Childcare is provided Mo. 8.30 am – 5.00pm on a casual and permanent basis.	Wingate Avenue Community Centre - enday to Friday during the hours of
Sessions charged are 3, 4 and 5 hours.	
Hours of care used are dependent on the sessions yo	our child/ren are booked in for.
Our Current sessions and fee schedule is on display childcare handbook and on our website: http://wing	
I have viewed the Fee schedule on display and accepunderstand fee's may change from time to time	t liability to pay the fees as specified, I
Parent Signature:	
Date:	

IMMUNISATION - Grace period eligibility assessment form

Name of child:		
Name of parent:		
Date:		
Question	Yes	No
Is your child Aboriginal or Torres Strait Islander? (verbal response) [Note: if the answer to this question is yes, a Koori Education Support Officer can be engaged to support the family. See the Useful Contacts section of this Toolkit.] [Note: Aboriginal or Torres Strait Islander families may be engaged with, or wish to engage with, their local Aboriginal Community Controlled Health Organisation (ACCHO), for the purposes of accessing immunisation. For contact details for ACCHOs see the Useful Contacts section of this Toolkit.]		
Do you or your child hold a health care card? (sight a copy of card)		
Do you hold a pensioner concession card? (sight a copy of card)		
Do you hold a veterans affairs Gold or White card? (sight a copy of card)		
Is your child from a multiple birth of triplets or more? (sight a copy of the child's birth certificate)		
Are you and your child currently evacuated from your home due to an emergency such as a flood or bushfire? (verbal response)		
Is your child in the care of an adult who is not the child's parent due to an emergency or exceptional circumstance such as parental illness or incapacity? (verbal response)		
Did your child arrive in Australia as a refugee or asylum seeker? (verbal response)		
Is child protection involved with your family or have they been in the past? (see note on previous page) (verbal response)	;	
Has your family received support through Family Services? (see note on previous page) (verbal response)		
Are you living in crisis or emergency accommodation or are you being supported by a housing agency or family violence service? (see note on previous page)(verbal response)		
Assessment and records – STAFF TO COMPLETE		
Is child eligible for the grace period	Yes	No
If Yes		
Date child will first attend the service:		
Date the grace period ends (16 weeks after date child first attends):		
Has acceptable immunisation documentation been provided at the end of the 16 weeks?	Yes	No
Staff Members Name: Signature:		
Position: Date:		



PRIVACY COLLECTION STATEMENT

Wingate Avenue Community Centre is committed to handling personal information responsibly and with respect for the principle that people have control over the way information about them is handled.

All people are entitled to have personal information treated with confidentiality. Wingate Avenue Community Centre will endeavour to protect confidentiality, and will create an environment of respect and privacy for program participants and service users.

No personal information about clients and families using the childcare service may be given out without the person's consent.

Confidentiality applies to verbal information, written information and information stored on computers and discs.

Childcare staff and volunteers and Committee of Management will respect the confidentiality of information obtained in the course of their work with Wingate Avenue Community Centre.

Staff are entitled to share information with their supervisor, Maternal Child Health Nurse or any other Medical Practitioner (internal or external) Settlement Support Services for the purposes of supervision and debriefing. Information disclosed will be treated confidentially by the supervisor.

Information about clients and families using the childcare service shall remain confidential except where it involves:

- serious illegal actions on the part of a person involved with the Wingate Avenue Community Centre
- any issue which could endanger the safety of other people
- any issue which could endanger person and/or dependent children
- where a staff member is obliged to make a notification to the Department of Human Services.

A COPY OF WINGATE AVENUE COMMUNITY CENTRE'S PRIVACY POLICY IS DISPLAID AT THE ENTRANCE OF THE CHILDCARE CENTRE.

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* 1998 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.