



DALBY CHRISTIAN COLLEGE

Early Learning Centre

Enrolment Form

Kindy / Pre-Prep / OSHC



2A Mary St., Dalby Qld 4405

Phone: (07) 4672 4229

Email: elc@dalbycc.qld.edu.au



ADDITIONAL INFORMATION

Please attach copies of the following information with the completed enrolment form:

- Birth Certificate
- Immunization record
- Direct Debit form
- Medical action plan (if applicable)
- Court orders or legal documents (if applicable)



ENROLMENT FORM

EARLY LEARNING CENTRE- Kindy and Pre-Prep
 Phone: 07 4672 4229 Email: elc@dalbycc.qld.edu.au

CHILD'S INFORMATION

Surname	
First Names	
Preferred Name	
Date of Birth	
Gender <i>as per birth certificate</i>	<input type="checkbox"/> Male <input type="checkbox"/> Female
Child CRN	
Child's Home Address (line 1)	
Child's Home Address (line 2)	
Does the child identify as	<input type="checkbox"/> Aboriginal <input type="checkbox"/> TS Island <input type="checkbox"/> Neither
Country of Birth	
Citizenship	
Language Spoken at Home	<input type="checkbox"/> English <input type="checkbox"/> Other (specify)
Any special considerations for this child? Cultural, Religious or Additional needs	

PARENT / GUARDIAN INFORMATION	PARENT / GUARDIAN 1	PARENT / GUARDIAN 2
Surname		
First Name		
Date of Birth		
Home Address (line 1)		
Home Address (line 2)		
Postal Address		
Email Address		
Current Occupation		
Workplace Name		
Phone Numbers Home		
Work		
Mobile		
Health Care / Pension Card no. (Please provide a copy)		
Parent / Guardian CRN		



BOOKING REQUEST

Please note: Kindy and Pre-Prep operate during school terms only.

Vacation care during school holidays must be booked separately.

Please select your preferred days below. We will do our best to accommodate your preferences where there is availability within our legal educator to child ratios. Where your preferred days are not available, we will be happy to offer you any alternatives that are available, and/or place you on a wait list for the days preferred.

Requested Start Date: _____

Echidnas (3 - 4 years) - 8.30am – 3.00pm				
Monday	Tuesday	Wednesday	Thursday	Friday

Echidnas (3- 4 years) - 7.00am – 6.00pm				
Monday	Tuesday	Wednesday	Thursday	Friday

Pre-Prep – 8.45am – 3.00pm - Minimum 5 days a fortnight					
Week 1	Monday	Tuesday	Wednesday	Thursday	Friday
Week 2	Monday	Tuesday	Wednesday	Thursday	Friday

Holiday Rate
\$20 discount on usual rate (before CCS). Applicable up to a maximum of 4 weeks holiday (taken in school term times) per year with 2 weeks prior written notice.

Outside School hours Care				
Before School Care - 7.00am – 8.45am				
Monday	Tuesday	Wednesday	Thursday	Friday
After School Care - 3.08pm – 6.00pm				
Monday	Tuesday	Wednesday	Thursday	Friday

Vacation Care – operates during school holiday periods please complete a **Vacation Care Booking form** if you wish to book a place. School holiday times can be found in the current ELC handbook.

Office use only	
Approved Start Date:	
Approved Group:	
Approved Days:	



EMERGENCY CONTACT / AUTHORISED PERSON (other than parents)

Only persons listed will be authorised to collect. Current identification will be required. Please list at least 2.

Contact Name _____	Contact Name _____
Relationship to Child _____	Relationship to Child _____
Address: _____	Address: _____
Phone No. _____	Phone No. _____
Contact Name _____	Contact Name _____
Relationship to Child _____	Relationship to Child _____
Address: _____	Address: _____
Phone No. _____	Phone No. _____

Please make sure the Emergency contacts listed above are aware that they are an emergency contact for your child and that they will be reachable on the days when you know that you will not be in town. An Emergency contact can give consent of authorisation of medication, medical treatment, ambulance transport, authority to take the child outside of the service premises, or on excursions and they can collect your child in an emergency.

Custody or Access Notices

Are there any court orders or legal documentation relating to this child? YES NO

Early Childhood laws state that families must provide copies of any Court orders affecting children/famililes/homes. Any updates also need to be provided.



MEDICAL INFORMATION

Relevant medical reports must be supplied with the enrolment form. Failure to disclose any medical or developmental conditions may affect enrolment.

Immunisation Status: <input type="checkbox"/> Up to date <input type="checkbox"/> Not Immunised	Centre Use Only: <i>Has a copy of the child's immunisation record been provided?</i> YES / NO
Epilepsy: Yes / No	<i>Please specify type and any medication/ action plans</i>
Diabetes: Yes / No <i>Please provide a copy of child's diabetes action plan from your medical practioner.</i>	<i>Please specify type/ frequency and any medication/ action plans</i>
Hearing Impairment: Yes / No	<i>Please specify severity</i>
Vision Impairment: Yes / No	<i>Please specify severity</i>
Asthma: Yes / No <i>Please provide a copy of child's asthma action plan from your medical practioner.</i>	<i>Please specify frequency and any medication.</i>
Allergies: Yes / No <i>If anaphylactic please provide a copy of child's anaphylaxis action plan from your medical practioner, and an EpiPen to be kept at the service.</i>	<i>Please list any allergies and their severity – mild/ anaphylactic.</i>
Health Concerns: Yes / No <i>Please specify any other health concerns, conditions, or history that the Centre needs to be aware of?</i>	
Dietary restrictions: Yes / No <i>Please specify any dietary restrictions that the Centre should be aware of.</i>	
Is your child seeing any other specialists? Yes / No <i>eg. Speech Therapist, Occupational Therapist</i>	



MEDICAL TREATMENT AUTHORISATION

Doctor's Name:		Doctor's Phone	
Doctor's Address:			
Hospital/ Service Name:		Medicare Number:	
		Ref. number:	Expiry date:
Private Health Cover:	Yes/No	Private Health Fund:	
		Private Health Number:	
<input type="checkbox"/> I authorise and give my consent for my child to receive medical treatment from a medical practitioner, hospital or ambulance in the event that my child requires medical treatment.			
<input type="checkbox"/> I authorise transportation of my child by an ambulance service when my child requires medical treatment.			
<input type="checkbox"/> I authorise the nominated supervisor/ responsible person at the service to administer Panadol should my child have a temperature over 38 degrees, and I am unable to collect my child within one hour of notification. I will be notified over the phone before Panadol is given to ensure my child has not had Panadol at an earlier time in the day.			
<input type="checkbox"/> I acknowledge that medication will only be administered at the centre if it is in the original container, with the original label and instructions that can be clearly read. The medication must be within it's used by date. Additionally the medication must be prescribed by a medical practitioner. The label must contain the child's name and dosage instructions. This includes medications that are usually non-prescription. I will complete an "Authorisation to Administer Medication" form to permit educators to administer medication when it is needed.			
Parent Signature		Name	Date

If your child has any other medical concerns, please ensure that you have provided a Medical Management Plan developed in consultation with your medical practitioner before your child commences.



Terms and Conditions of Enrolment

- I declare that the information in this enrolment form is true and correct, and that I will immediately inform the service in the event of any change to this information.
- I will liaise with educators at the service to assist with my child's learning and development by engaging in conversations, attending parent meetings as requested by the service or myself, completing parent input forms, and communicating via telephone or email.
- I understand that my child is to be dropped off and collected from the centre as per their booking time. On arrival at the centre my child is to be taken to a member of staff.
- I understand that my child may only be collected by an "authorised person" who is over 17 years of age (specified on the enrolment form – Emergency Contact/Authorised Person). I agree to keep the service updated to any changes of details for these persons.
- Should any other person be required to collect my child from Dalby Christian College Early Learning Centre, I understand that I will contact the ELC and provide the name, contact number and relationship to the child of the nominated person. On arrival at the centre, the nominated person will show ID to an ELC staff member and sign a Temporary Arrangement Form.

MEDICAL

- Should my child become unwell whilst in attendance at the service, I understand that I will be contacted to collect them from the centre, or to arrange an Emergency Contact/ Authorised Nominee to collect them.
- Should my child contract a contagious disease/ illness, I understand that they will be excluded from the service as prescribed by the government health department. My child may be accepted back into the service on the provision of a medical certificate from a practitioner, however the final decision rests with the Nominated Supervisor of the centre.
- I authorise Educators to apply sunscreen to my child before going outside in accordance with our sun safety policy. I will supply my child's own sunscreen if my child has reactions to the sunscreen provided by the centre.
- If my child has not been immunised, I understand that they will be excluded from care in the event of an outbreak of any of the communicable diseases otherwise vaccinated against, until the service has received medical advice that the infectious period has passed.
- I authorise educators at Dalby Christian College Early Learning Centre, who hold a current first aid certificate, to seek or provide medical, dental, hospital treatment or the ambulance service to my child in the case of an emergency.

FEE SCHEDULES

- I agree to abide by the fees and payment structures and policies of Dalby Christian College Early Learning Centre. I understand that fees are to be paid two weeks in advance at all times. I acknowledge that payment for my child's account is still required on days of non - attendance such as public holidays or if my child is absent or sick.
- I understand that I am required by regulations to sign my child in and out of the service, and to sign for any days absent and public holidays in acknowledgement that my child did not attend the centre but CCS is still claimed for these days. I understand that failure to sign my child in or out or signing for absent days may result in full fees being charged for these days.
- I understand that it is my responsibility to maintain a current Income Assessment with the FAO for Child Care Subsidy purposes.
- I understand that I am required to keep my child's immunisation details up to date. Failure to do so will result in my child's CCS being cancelled with the FAO.
- I understand that if my CCS drops out or is cancelled due to my child's immunisation not being up to date, it will be my responsibility to pay the full cost of fees until the matter is resolved with Centrelink.
- I understand that I am required to give written notice for all cancellations or changes to enrolment a minimum of fourteen days in advance. I understand that two weeks fees will continue to be charged at the applied CCS rate where applicable. Should my child fail to attend, for any reason, on any day during the notice period full fees will be charged for and or all of such days.

