



**OSHC
Enrolment Form
2018**

Operating from the Sale Primary School
Macalister Street

Sale Vic 3850

Phone: 5144 6952

www.gumnutselc.com.au

gumnutselc@netspace.net.au

CHILD'S NAME: _____

DETAILS OF CHILD

What school does your child attend?

First Name..... Surname.....

Date of Birth (Please circle) Male Female

Is the child of Aboriginal or Torres Strait Islander decent? (please circle) YES NO

If yes please stipulate.....

Main Language spoken at home

Names and ages of other children in the family

.....

Any special issues in relation to your child e.g. cultural beliefs, religion, food etc.?

.....

CHILD CARE BENEFIT – Please contact the Family Assistance Office on 13 61 50 or call into to your local Centrelink branch before commencing care, to register for Child Care Benefit. You will be given a reference number (CRN) for yourself and your child. Please list these details below.

Child CRN _____ **Parent 1 CRN** _____

Please inform the Director if you have any other children in care at other services.

**DETAILS OF PARENT 1
(Parent listed to claim Child Care Benefit)**

Does the child live with this Parent/guardian
YES / NO

Name.....

DATE OF BIRTH

Address.....

.....

Telephone(home).....

(work).....

(mobile).....

Employer.....

Occupation.....

Languages spoken.....

Email Address:.....

DETAILS OF CO-PARENT

Does the child live with this parent/guardian
YES / NO

Name.....

Address.....

.....

Telephone(home).....

(work).....

(mobile).....

Employer.....

Occupation.....

Languages spoken.....

Other residency arrangements (please give details)

Name/Relationship.....

Address.....

Telephone (home).....

(work).....

(mobile).....

MEDICAL INFORMATION

Does your child have any additional needs? (Please Circle) YES NO

If yes please provide details.....

Is he/she under any medical treatment?.....

Has he/she had any history of illness?.....

Is there anything about his/her physical well being that you feel we should know? (e.g allergies, food intolerances, asthma, sensitivities, etc. If your child has asthma we need a copy of an action plan signed by your child's doctor)

Signed Asthma Action Plan attached	YES	NO	N/A
Signed Action Plan for Allergic reactions	YES	NO	N/A

Please Note: If there is a specific management procedure to be followed due to the child's allergy/illness, please complete an 'Emergency Management Plan' either from your GP or collect one from Gumnuts

OTHER INFORMATION

Is there anything else that we should know about your child? (eg. Excessive fears, favourite belongings/activities, pets, early intervention services etc.

Anaphylaxis

Has your child been diagnosed at risk of anaphylaxis? (please circle) YES NO

Does your child have an auto injection device (eg: EpiPen)? YES NO

Has the anaphylaxis medical management plan been provided to the service? YES NO

In the case of anaphylaxis you will be provided with a copy of the services anaphylaxis management policy. You will be required to provide the service with an individual medical management plan for

EMERGENCY CONTACT

In case of accident or injury, trauma or illness when parents/guardians are not available, please state two people who could collect the child and take care of them for the day. In the event that the child is not collected from the Centre and the parent or guardians cannot be contacted, this list will also be used to arrange someone to collect the child.

Name..... Relationship.....

Address.....

Phone number (home).....

(work).....

(mobile).....

Name..... Relationship.....

Address.....

Phone number (home).....

(work).....

(mobile).....

AMBULANCE SUBSCRIPTION (please circle) NO YES Number.....

MEDICARE NO. **PRIVATE HEALTH NO.**

FAMILY DOCTOR

Name of Doctor..... Name of Practice

Address..... Phone.....

NOMINEES AUTHORISED TO COLLECT CHILDREN

(An Authorised Nominee is a person who has been given permission by a parent or family member to collect the child from the service)

1) Name..... Relationship.....

Address.....

Phone Home)..... Work)..... Mobile).....

2) Name..... Relationship.....

Address.....

Phone Home)..... Work)..... Mobile).....

3) Name..... Relationship.....

Address.....

Phone Home)..... Work)..... Mobile).....

DECLARATION AND CONSENT TO EMERGENCY MEDICAL TREATMENT

I/We.....print full name/s

Person/s with authorised nominee of the child referred to in this enrolment form,

- declare that the information in this enrolment form is true and correct and undertake to immediately inform the children’s service in the event of any change to this information
- agree to collect or make arrangement for the collection of the child referred to in this enrolment form if he/she becomes unwell at the service
- consent to the staff of the children’s service seeking medical treatment by a medical practitioner, hospital or ambulance service, or where appropriate, administer such emergency medical treatment as is reasonably necessary and agree to reimburse any necessary expenses incurred by the children’s service

PRIVACY NOTIFICATION

Gumnuts Early Learning Centre uses the enrolment form to collect personal information for the purposes of program enrolment and statistical recording. The information may be shared with funding agencies and administrators for operational purposes only. The information will not be disclosed to any other party except as required by law. You are able to amend or correct information on request, by contacting the Centre Director.

PARENT CONSENT TO THE FOLLOWING CENTRE PRACTICES AND PROCEDURES

- I give permission for my child to be photographed and/or video taped by staff members. I understand that these photos and video footage are for centre use only

YES NO (please circle appropriate response)

- I give permission for my child to be photographed and/or videotaped and have these images posted on the centres Facebook page.

YES NO (please circle appropriate response)

- I give permission for my child to be photographed and/or video taped in the event of media reportage.

YES NO (please circle appropriate response)

- I give permission for my child to have a 30+ sunscreen applied as per Centre Sunsmart Policy

YES NO (please circle appropriate response)

- If you do not want any of the following products used on your child IF REQUIRED please cross them out;

AEROGUARD SALINE SOLUTION BANDAIDS

- I give permission for staff to check my child's hair for head lice to minimise the spread of cross infection in the Centre

YES NO (please circle appropriate response)

- I give permission for staff of Gumnuts Early Learning Centre to take my child on routine outings out of Sale Primary School to Victoria Park when convenient, with the permission of the Centre Director or Nominated Supervisor and in accordance with Education and Care Services National Law and Regulations 2011 and Centre Policies and Procedures

YES NO

- I give permission for my child to participate in spontaneous cooking experiences using the following ingredients:
Butters, Breads, Flours, Eggs, Oils, Pastries, Sugars, Cheeses, Creams, Milks, Food colourings, Essences, Herbs & Spices, 100s & 1000s, Coconut, Fruit & Vegetables & meat products.

YES NO (please circle appropriate response)

- I agree to abide by all policy and philosophy guidelines of Gumnuts Early Learning Centre.

YES NO (please circle appropriate response)

I _____ declare as the authorised nominee of the child referred to in this enrolment form that the information provided is true and correct and undertake to immediately inform the children's service in the event of any change to this information.

ASSOCIATION MEMBER – I understand that when I enrol my child at the Centre, I become a member of the association who supports its purposes and will continue to be a member until I no longer use the service

PARENT/GUARDIAN SIGNATURE:

DATE:.....

DIRECTOR/INTERVIEWER SIGNATURE:

DATE:.....

Code of conduct for parents/guardians, students, volunteers, contractors and visitors

I commit to contributing to creating an environment at GELC that:

- respects the rights of the child and values diversity
- acknowledges the vulnerability of Aboriginal children, children from a culturally and linguistically diverse background and children with a disability and has zero tolerance of discrimination
- maintains a duty of care (refer to *Definitions*) towards all children at the service
- is committed to the safety and wellbeing of each child at the service
- is committed to the safety and wellbeing of all staff at the service
- provides a safe and secure environment for all at the service
- provides an open, welcoming environment where everyone's contribution is valued and respected
- is committed to communicating openly and honestly
- is committed to continually learning how to be inclusive and respectful of cultural needs
- encourages parents/guardians, volunteers, students and community members to support and participate in the program and activities of the service.

Relationships with children

In our relationships with children, I commit to:

being a positive role model at all times

encouraging children to express themselves and their opinions

allowing children to undertake experiences that develop self-reliance and self-esteem

maintaining a safe environment for children

speaking to children in an encouraging and positive manner

giving each child positive guidance and encouraging appropriate behaviour

regarding all children equally, and with respect and dignity

having regard to each child's cultural values

respecting individual difference including age, physical and intellectual development, and catering to the abilities of each child at the service.

Relationships with the Approved Provider, Nominated Supervisor, staff and others

In my relationships with the Approved Provider, Nominated Supervisor, staff, other parents/guardians, volunteers and visitors I commit to:

reading and abiding by the *Code of Conduct Policy*

developing relationships based on mutual respect

working in partnership in a courteous, respectful and encouraging manner

valuing the input of others

sharing our expertise and knowledge in a considered manner

respecting the rights of others as individuals

giving encouraging and constructive feedback, and respecting the value of different professional approaches

respecting the privacy of children and their families and only disclosing information to people who have a need to know as required under the Privacy and Confidentiality policy

following the directions of staff at all times

treating the kindergarten environment with respect

raising any concerns, including concerns about safety, as soon as possible with staff to ensure that they can be resolved efficiently

raising any complaints or grievances in accordance with the *Complaints and Grievances Policy*.

Code of Conduct Policy Acknowledgement for parents/guardians, students, contractors and volunteers

I hereby acknowledge that I received a copy of the *Code of Conduct Policy* for GELC.

I have read this policy and understand its contents. I commit to abiding by the Code of Conduct and fulfilling my responsibilities as outlined in this policy whilst my child is attending GELC.

I agree to abide by the values, principles and practices set out within.

I understand that a breach of the Code of Conduct may lead to limitations being placed on my attendance at the service.

Signature

Name (please print)

Date

Thank you for your contribution to making GELC an open, safe, welcoming and friendly environment.

PARENT INDUCTION/ORIENTATION CHECKLIST

SUPERIOR CARE AND EDUCATION FOR YOUR CHILD

Open Monday to Friday 6:30am– 6:00pm

Offering Long Day Care, Before and After School Care and a Vacation Care Program

- When collecting your child please check your information pocket for fees and any other important notices. You will also need to sign your child out before you leave. Please ensure you inform a staff member that you are leaving with your child. In the pocket you will find your fees each week and any other important information such as newsletters, fact sheets and upcoming events, please check your pocket each time you visit the Centre.
- A list and photographs of Gumnuts staff members can be found in the foyer of the main Centre
- A parent suggestions form can also be found on the pin board. Please complete a form if you have any suggestions or comments about our Centre and OSHC Program.
- A committee information board is located next to the Koala's room door in the foyer of the Centre. Please check the board for minutes of committee meetings and changes to policies and procedures. Parents will be asked to have input into these changes through the newsletter and notification on the committee notice board

- Provided with a copy of the Parent Handbook
- Location of General Policy Handbook
- Introduction to OSHC staff
- Location of hall, sign out book and parent info board
- Accident/Medication Book location and explanation of procedures
- Location of room program and location of parent comments sheet
- Discussion of how programs are created
- Location of toilet areas
- Location of Kitchen
- Parent complaints procedure
- Location of outdoor areas
- Room emergency evacuation procedure
- Explanation for procedures for staff who are absent
- Fee payment procedure
- Child Care Benefit details given to Centre
- Centre has obtained a copy of child's Immunisation details
- Explanation of items to pack for the child
- Centre Sun Smart Policy
- Explanation of cancellation of care and exit procedure
- Parent Comments/feedback or suggestions on induction -

Parent Signature: _____ Date: _____

Staff Member Signature: _____