



Enrolment Agreement

This enrolment agreement provides information required by our centre to meet the Ministry of Education funding and licensing requirements. Please complete all sections, circling Yes/No, or recording N/A (not applicable) as required.

Child's full name <small>As recorded on birth certificate</small>			
Name your child is known by			
Date of Birth	Male	Female	Evidence is required to confirm birth date, ie birth certificate or passport?
Child's home address <small>or addresses</small>			
Ethnic origin			
Iwi your child belongs to			
Languages spoken other than English			
Are there any religious or cultural beliefs we need to know?			
Parent/Guardian details <i>(if not mother/father please record relationship to child)</i>			
Mothers name			
Home Address			
Mailing address			
Home phone	Mobile		
Workplace	Work phone		
Email			
Would you like invoices and newsletter correspondence emailed to this address?	Yes	No	N/A
Fathers name			
Home address			
Mailing address			
Home phone	Mobile		
Workplace	Work phone		
Email (if different)			
Would you like invoices and newsletter correspondence emailed to this address?	Yes	No	N/A

Privacy Statement: All personal information on your child will be kept securely and remain confidential.
Any changes to this form must be signed and dated by the parent/guardian.

Other caregiver			
Home Address			
Mailing address			
Home phone		Mobile	
Workplace		Work phone	
Email			
Would you like invoices and newsletter correspondence emailed to this address?		Yes	No
			N/A

Emergency Contacts: In case of a civil defence emergency, or extreme weather conditions that force closure, we need to be able to contact somebody locally in case we are unable to contact caregivers. Please record at least one other person who would be able to collect your child if there was an "emergency".

Name			
Address			
Home phone		Mobile	
Workplace		Work phone	
Name			
Address			
Home phone		Mobile	
Workplace		Work phone	
Name			
Address			
Home phone		Mobile	
Workplace		Work phone	

Custodial Statement:

Are there any custodial arrangements concerning your child?	Yes	No
If YES, please give details of any custodial arrangements or court orders (a copy of any court order is required)		

Person/s who cannot pick up your child:

Name	
Name	

I hereby agree to notify the centre if anyone other than the people listed in this agreement will pick up my child and understand that my child will be kept at the centre until such permission is given.

Parent/Guardian Signature:	Date:
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Health Information:		
Doctors Name		
Surgery		
Address		
Phone number		
Please provide details of any illnesses/food intolerances or allergies:		
	Date:	
	Date:	
	Date:	
	Date:	
Is your child up-to-date with immunisations?	Yes	No
Have we sighted and recorded current immunisation details?	Yes	No
Category (i) medicines are non-prescription preparations provided by our centre that are not ingested and used for the 'first aid' treatment of minor injuries.		
Do you approve of the following category (i) medications to be used on your child?		
- Icepacks	Yes	No
- Saline solutions	Yes	No
- Arnica	Yes	No
- Band-aids/ sticky plasters	Yes	No
Parent/Guardian Signature:	Date:	
Category (ii) medicines are used for a specific period of time to treat a condition or symptom that is specific to your child such as antibiotics, paracetamol or drops. If your child requires medicine, the information will have to be recorded in the "medicine folder".		
Category (iii) medicines are for an on-going condition that is specific to your child, which requires regular medication as part of an individual health plan such as asthma, eczema, epilepsy, allergic reactions or diabetes.		
Does your child require regular medication as part of an individual health plan? If "yes", please discuss with the Head Teacher further action required.	Yes	No
During October to April when the sun is strongest, I acknowledge that it is my responsibility to sunscreen my child before they attend the centre and understand that the teachers will reapply sunscreen after lunch before going outside.		
I hereby agree that I will abide by the "Illness procedure" and not bring my child to the centre with a notifiable childhood illness or within 24 hours of vomiting or diarrhoea. <i>(The illness procedure is displayed in the foyer and available on our website for your convenience).</i>		
In the event of an accident or an emergency, and the parent/guardian cannot be contacted, I authorise the centre to seek medical advice for my child's best interest. The information given in this agreement will accompany them.		
Parent/Guardian Signature:	Date:	

Enrolment Details:						child #
Date of Enrolment:		Date of Entry:			Date of Exit:	
Days Enrolled:	Monday	Tuesday	Wednesday	Thursday	Friday	Total number of hours
Times Enrolled:						
Desirable times to be enrolled:						
Parent/Guardian Signature:					Date:	

Dual Enrolment Declaration:
I hereby declare that my child is not enrolled at another early childhood service at the same times that he/she is enrolled at Aspiring Beginnings Early Learning Centre, for either casual or permanent bookings.
Parent/Guardian Signature:
Date:

Statutory Holidays / Term Breaks:
This enrolment agreement is inclusive of school term breaks as the centre remains open during school holidays except for the repairs and maintenance closedown at Easter. Otherwise the centre is closed for all statutory holidays and four weeks at Christmas.

Donations:
A donation is a voluntary payment. There is no obligation to pay and there is no enforcement of payment. Occasionally we may request a donation in exchange for goods produced by the children or for special events to help cover expenses. Any financial contribution to help support the centre is always gratefully appreciated. Please talk to the office staff if you would like to establish a regular contribution.

Healthy Heart Daily Menu:		
For a nominal charge; morning tea, a cooked lunch, dessert and afternoon tea will be provided at the centre.		
Would you like us to provide daily meals for your child?	Yes	No
If "no", would you like us to provide meals on nominated days? (explain below)	Yes	No
For days when food is not provided by the centre, I hereby agree:		
- to provide a piece of fruit for shared morning and/or afternoon tea.		
- to provide sufficient food in a lunchbox for my child's day.		
- that if extra food is provided because my child is still 'hungry' there is a nominal charge to recover the cost.		
Parent/Guardian Signature:		Date:

Other information:	
I hereby agree to:	
- keep my child's attendance within the daily booked times.	
- complete the daily sign in desk procedure.	
- notify the centre if my child will be absent.	
- pay the weekly invoice within 7 days of invoice date and understand that the parents/guardians named in this agreement will be liable for any debt recovery collection fees.	
- Read the fees policy, which is available on the website or at the centre, to familiarise myself with what costs are associated with the care of my child.	
Parent/Guardian Signature:	Date:

Required information for licensing purposes:		
Excursions: (refer to the "Taking children out of the centre/excursions" policy)		
- I hereby consent for my child to partake in low risk excursions such as the hockey turf and around the block and understand that the minimum ratios will be; 1:6 (for aged 2 and over, or 1:4 for mixed ages or 1:2 for children under 2. I also understand that all other excursions will be advertised and require written consent before my child can participate.	Yes	No
Photo/video:		
- I hereby consent to digital images (still or moving), and written observations of my child to be recorded and displayed within the centre for group or individual records.	Yes	No
- I hereby consent to photographs of my child being published on your website.	Yes	No
- Occasionally for publicity purposes, local media will photograph children for publication sometimes recording name and age. Once authorised by centre management do you consent for your child to be included?	Yes	No
Parent/Guardian Signature:	Date:	

Other information:	
Aspiring Beginnings Early Learning Centre has a number of policies that set out the procedures that are in place for the care and education of the children who attend. We strongly urge you to read these. Most of this information is available on our website or alternatively all policies are available from the parent library. The signing of this enrolment agreement indicates that you will abide by the policies of this service, and understand how you can have input to policy review.	
Please complete the enclosed "ME" sheet. If you want to share some information about your family, this gives us some background knowledge which we can discuss with your child to help make them feel comfortable in their new surroundings.	
Parent/Guardian Signature:	Date:

Parent Declaration	
I declare that all the information provided in this agreement is true and correct to the best of my knowledge.	
Parent/Guardian Signature:	Date:
Service Declaration	
On behalf of Aspiring Beginnings Early Learning Centre, I declare that this agreement has been checked and all relevant sections have been completed.	
Service Provider Signature:	Date:
<i>Administrator to sign on behalf of the centre</i>	

Privacy Statement: All personal information on your child will be kept securely and remain confidential. Any changes to this form must be signed and dated by the parent/guardian.

Office use only						child #
Change of Days/Times of Enrolment effective:						
Days Enrolled:	Monday	Tuesday	Wednesday	Thursday	Friday	Total number of hours
Times Enrolled:						
For 20 hours ECE fill out boxes below:						
20 hours ECE at this service						Total number of hours:
20 hours ECE at another service						Total number of hours:
Parent/Guardian Signature:					Date:	

Change of Days/Times of Enrolment effective:						
Days Enrolled:	Monday	Tuesday	Wednesday	Thursday	Friday	Total number of hours
Times Enrolled:						
For 20 hours ECE fill out boxes below:						
20 hours ECE at this service						Total number of hours:
20 hours ECE at another service						Total number of hours:
Parent/Guardian Signature:					Date:	

Change of Days/Times of Enrolment effective:						
Days Enrolled:	Monday	Tuesday	Wednesday	Thursday	Friday	Total number of hours
Times Enrolled:						
For 20 hours ECE fill out boxes below:						
20 hours ECE at this service						Total number of hours:
20 hours ECE at another service						Total number of hours:
Parent/Guardian Signature:					Date:	