



Glenbervie after school care programme enrolment form

Child(ren)s Details

Name		DOB	
Name		DOB	
Name		DOB	

Address		Phone	
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Family Details

Mothers Name					
Address					
Phone (H)		Phone (W)		Phone (M)	

Fathers Name					
Address					
Phone (H)		Phone (W)		Phone (M)	

Authorised people to collect your child(ren)

Name		Phone	
Name		Phone	
Name		Phone	

Custody Details

Are there any custody details relating to your child(ren) that we need to be aware of?

Yes	No	If yes, please state any instructions for Hopscotch ASC

Emergency contacts

Name		Relationship with child			
Phone (H)		Phone (W)		Phone (M)	
Name		Relationship with child			
Phone (H)		Phone (W)		Phone (M)	

Childs Doctor		Phone	
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Does your child have any particular health needs we should be aware of?

Yes No

If yes, please state below

[Empty text box for health needs]

Does your child have any allergies we should be aware of?

Yes No

If yes, please state below

[Empty text box for allergies]

Please state any medication that may need to be administered by Hopsotch staff while your child attending the hopsotch programme.

Medications should be clearly labeled and have instructions.

[Empty text box for medication]

Is there anything else we should be aware of in order to take good care of your child?

Yes No

If yes, please state below

[Empty text box for other care information]

In the case of a medical emergency if the parents or caregivers cannot be located, the supervisor has my permission to arrange any necessary urgent medical treatment at my cost.

Yes No

Enrolment details

Full time

Part time

Casual

Start date

Please circle the days of the week your child will be attending. If casual, please add the date.

Mon	Tue	Wed	Thur	Fri
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Date	<input type="text"/>	Name	<input type="text"/>
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Sign	<input type="text"/>
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Parent/Programme Service Contract

I wish to enrol my child in the Hopscotch after school care service. I have read through and agree to the following conditions.

Parent responsibilities

1. All children including those attending on a casual basis must be formally enrolled.
2. The supervisor will be advised immediately of any change to the enrolment form.
3. All children are to be collected no later than 5.30pm each day.
4. The supervisor is to be advised if someone other than the appointed person is collecting the child(ren). No child/ren will be released to an unauthorised person.
5. Children must be signed out when collected.
6. On each occasion the child/ren will not be attending, the supervisor must be informed before 1pm on the day.
7. Fees are to be paid weekly in advance for regular care or if casual when children are collected on the day.

Permissions

1. I give permission for my child/ren to go swimming in the local or school pool during programme time.
2. I give permission for my child/ren to be part of planned excursions within the programme.
3. Photographs of my child/ren may be used for genuine publicity purposes of this programme and The OSCAR Foundation .
4. The supervisor may arrange urgent medical treatment at my expense.

Penalties

1. A penalty fee of \$20.00 may be charged for failure to collect children by closing time.
2. A penalty fee of 10% may be charged for payment in arrears

Concerns and disputes

1. A full copy of the programme's operating policies, including the process for voicing concerns or complaints is available at the programme. Any queries or concerns should be initially directed to the supervisor.
2. Behaviour that consistently affects the quality of care available to other children may result in dismissal from the service, after other possibilities have been explored.
3. Any disagreement of fees is to be addressed with the programme manager.

Name of Parent/Guardian

Signature

Date
