

Enrolment Booklet

C&K acknowledges the Traditional Custodians of the lands on which our centres and offices across Queensland are located. C&K also pays respects to all Elders past, present and emerging.



Ask for an
interpreter

Welcome to C&K. Completing this enrolment booklet will provide us with valuable information about your child and family that we will use to provide the highest standards of education and care for your child and support their transition into our centre.

Bienvenidos a C&K. Al completar este folleto de inscripción, nos estará proporcionando información importante sobre su hijo(a) y familia que usaremos para poder proveer un programa de educación y cuidado de la mejor calidad y también ayudar con la transición a nuestro servicio. Si usted necesita ayuda del servicio de traducción para poder completar este folleto, no dude en consultar con el personal de C&K.

C & K へようこそ。この登録手続き書を記入することにより、お子様とご家族の貴重な情報を提供して頂くことになります。私共ではその情報をもとに、お子様に対するの最も質の高い教育とお世話を提供させて頂き、この機関にお子様慣れるようにサポートします。この手続き書を記入するにあたり、翻訳サービスの援助が必要な場合には、お気軽にお申し付けください。

"مرحباً بكم في سي أند كاي. إن تعبئة كراسة التسجيل هذه ستوفر لنا معلومات قيمة عن طفلكم وأسرتكم، حيث نستعمل هذه المعلومات لتوفير أعلى مستوى من التعليم والرعاية لطفلكم، ولدعم انتقاله/إنتقاله ضمن خدمتنا. وفي حالة إحتياجكم الى مساعدة بشأن خدمة الترجمة لتعبئة هذه الكراسة يرجى عدم التردد في التحدث الى خدمتنا."

Welcome sa C&K. Ang pagsagot sa buklet ng pagpapatalang ito ay magbibigay sa amin ng mahahalagang impormasyon tungkol sa in yong anak at pamilya na gagamitin namin upang itaguyod ang pinakamataas na pamantayan ng pag-aaral at pag-aalaga sa inyong anak at suportahan ang kanilang paglipat sa serbisyo. Kung nangangailangan kayo ng serbisyo ng pagsasalin upang sagutin ang buklet na ito huwag mag-atubiling kausapin ang inyong serbisyo.

Chào mừng quý vị đến với Nhà Trẻ/Mẫu Giáo C&K. Việc điền vào tập ghi danh này sẽ cho chúng tôi những thông tin quý giá về con em và gia đình quý vị mà chúng tôi sẽ sử dụng để cung cấp các tiêu chuẩn giáo dục tiên tiến nhất hầu chăm lo cho con em quý vị và hỗ trợ việc chuyển tiếp các em vào trong dịch vụ. Nếu cần giúp đỡ việc phiên dịch để điền tập sách này, xin đừng ngần ngại nói chuyện với dịch vụ của mình.

欢迎来到 C&K。填写这份注册簿将为我们提供有关您的孩子和家庭的重要信息，我们将使用这些信息来为您的孩子提供最高标准的教育和照顾，并为他们在幼教机构的过渡期提供支持帮助。如果您需要获得翻译服务的帮助来填写这份注册簿，请告诉您的幼教机构。

Selamat datang ke C&K. Mengisi buku pendaftaran ini akan memberi kami maklumat penting mengenai anak anda dan keluarga anda, dan kami akan menggunakan maklumat tersebut untuk menyediakan standard pendidikan dan penjagaan yang tertinggi bagi anak anda dan menyokong peralihannya ke dalam perkhidmatan ini. Jika anda memerlukan bantuan khidmat penterjemahan untuk mengisi buku ini, jangan keberatan bertanya kepada perkhidmatan anda.

Bienvenue à C&K. En complétant ce livret d'inscription, vous nous fournirez de précieux renseignements sur votre enfant et votre famille que nous utiliserons pour fournir les plus hauts standards d'éducation et de soins à votre enfant et soutenir sa transition vers nos services. Si vous avez besoin de l'aide d'un service de traduction pour compléter ce livret, n'hésitez pas à en parler à votre service.

Καλώς ήρθατε στο C&K. Η συμπλήρωση αυτού του βιβλιαρίου εγγραφής θα μας παράσχει πολύτιμες πληροφορίες για το παιδί σας και για την οικογένειά σας που θα χρησιμοποιήσουμε για να προμοσφέρουμε τα ύψιστα επίπεδα παιδείας και φροντίδας για το παιδί σας και για να υποστηρίξουμε τη μετάβασή του στην υπηρεσία. Εάν χρειάζεσθε την βοήθεια μεταφραστικής υπηρεσίας για να συμπληρώσετε το βιβλιάριο αυτό, παρακαλούμε να μην διστάσετε να επικοινωνήσετε με την υπηρεσία σας.

إن استكمال ملء كتيب التسجيل هذا، يزودنا بمعلومات قيمة عن طفلك وعائلتك والتي سيتم استخدامها لتوفير أعلى مستويات التعليم والرعاية لطفلك ودعم فترة انتقاله الى خدمته. إذا كنت بحاجة الى المساعدة من خدمة الترجمة لإكمال هذا الكتيب، فلا تتردد من إفضلك في التحدث مع الخدمة.

Privacy Data Collection Statement

Our centre uses personal and sensitive information (as defined in the Privacy Act 1988) provided by you in this Enrolment Booklet to complete the enrolment of your child, determine potential fee rebates, establish your preferred fee payment options, manage your child's bookings and attendance, identify any additional services and information needed to support your child's enrolment and attendance, charge fees and process payments. In accordance with the Queensland Government's kindergarten funding model, our centre is a member of The Creche and Kindergarten Association Limited's (C&K) central governing body. We provide C&K with access to your information for the purposes of supporting our operations and calculating government funding. We may also use your information to set up your access to approved third-party software providers we use to deliver services to you, such as providing you with Customer Account Statements ([Parent Portal](#)) and online learning stories ([StoryPark](#)).

To complete your child's enrolment, the requested information is required by the [National Law, Education and Care Services National Law \(Queensland\) Act 2011](#), [Education and Care Services National Regulations \(2011\)](#), and C&K. If you choose not to provide us with the requested information, we may not be able to enrol your child.

We will not use or disclose your personal information for any other purpose unless you have consented, you would reasonably expect us to disclose the information for another purpose, or we are required by law.

In order to store your personal information electronically, our centre may disclose your information, in accordance with this notification and our [Privacy Policy](#), to overseas data storage recipients located in the United States and other countries. Our centre is reasonably satisfied that these countries and recipients have similar privacy protections to those afforded under Australian law.

Our [Privacy Policy](#) contains information about how we use and store your personal information, how you can access and correct your personal information, make a privacy-related complaint, and our centre's complaint handling process. To access or update your personal information please contact our centre directly.

Glossary of Terms

Aboriginal and/or Torres Strait Islander person	A person of Aboriginal and/or Torres Strait Islander descent who identifies as Aboriginal or Torres Strait Islander and is accepted as such by the community in which they live
Concession card	Health Care Card, letter stating the intent to issue a Health Care Card, Pensioner Concession Card, Veterans' Affairs Health Gold Card, or White Card
DOB	Date of birth
Eligible-age child	A child who is turning 4 years old by 30 June in the year they attend kindergarten
Free kindergarten	The Queensland Government's initiative to provide 15 hours per week, 40 weeks per year, up to 600 hours per year of free kindergarten for eligible-aged children
Kindergarten	A centre that provides an educational program, delivered by a qualified early childhood teacher, for a minimum of 15 hours per week, 40 weeks per year. This program can be delivered in a kindergarten or childcare centre
Medical condition	A current medical condition formally diagnosed by a registered medical practitioner
Medical condition management plan	A plan developed and authorized by a registered medical practitioner outlining the necessary information and instructions to appropriately care for a child with a medical condition
Parent/Guardian	The parent/guardian and/or court-appointed individual/organisation granted parental responsibility. Includes biological, or as a result of adoption, court order or some other reason
Photo ID	Drivers license, passport, or Photo Identification Card
Proof of birth	Birth Certificate, passport, Medicare-issued immunisation history, other government issued document stating date of birth, Statutory Declaration stating full name and Date of Birth certified by a Justice of the Peace (JP) or documentation provided by either a community elder/s or other relevant community member citing full name and date of birth
QKF	Queensland Kindergarten Funding (QKF) is the Queensland Government's initiative to provide free kindy

1. Getting to know your child

Your child's details

First name: Middle name(s):

Last name: Preferred name:

Date of birth:* Gender: Female Male Non-Binary/Unspecified

*Please provide our centre with proof of your child's date of birth. Please see page 3 for document examples.

Does your child identify as Aboriginal and/or Torres Strait Islander? (no evidence required):

- Not Indigenous Aboriginal Torres Strait Islander
 Aboriginal and Torres Strait Islander South Sea Islander Decline to answer

Medicare Card Number:

Home address:

Suburb: State: Postcode:

First/main language spoken in child's home:

Other languages spoken in child's home:

Cultural background:

Country of birth:

Religion (optional):

2. Queensland Kindergarten Funding (Free Kindy)

The Queensland Kindergarten Funding (QKF) supports centres with the cost of delivering an approved kindergarten program. If your child is of eligible age, that is, turning four by 30 June in the year they attend kindergarten, our centre may be able to claim QKF for your child.

Only one centre can claim QKF for your child so you need to nominate our centre to receive it here. If you do not nominate our centre, you will not be eligible for QKF at our centre.

If your eligible age child is enrolled in two Child Care Subsidy (CCS) approved childcare centres or two sessional kindergartens for the same enrolment period, you can choose which centre receives the funding.

If your eligible age child is enrolled in two different care types (for example a sessional kindergarten and a Child Care Subsidy (CCS) approved childcare), you must nominate the sessional kindergarten to receive QKF.

Would you like to nominate our centre to claim QKF?

Yes - if eligible at this centre

No - we are claiming QKF elsewhere. Please specify the type of care you are claiming QKF at:

Child Care Subsidy (CCS) approved centre

Sessional kindergarten

Concession eligibility: Please inform us if you are eligible for any of the following concessions.

a. Do you or your child have a current approved Health Care Card*, letter stating the intent to issue a Health Care Card, Pensioner Concession Card, Veterans' Affairs Health Gold Card or White Card?

Yes

No

*Health Care Card - child must be named on the card with a valid expiry date.

b. Do you have evidence of formal foster or kinship care arrangements or a child who is identified as living in a formal child protection out-of-home care arrangement?

Yes

No

If Yes, provide a copy of the Authority of Care Order.

Order start date Order end date

c. Do you have three or more children of the same age, enrolled in the same kindergarten year?

Yes

No

d. Has your family entered Australia under a visa or in the process of seeking a visa?

Yes

No

If Yes, provide a copy of the current applicable visa, immigrant document or ImmiCard and the following information:

Names on Visa

Visa number

Valid from Valid to

Type of Visa

4. Parent/guardian details

Important: Each custodial parent/guardian must be listed in this section. If there are any court orders or directives in place regarding your child, each parent/ guardian who has responsibility for decisions relating to the child's education must be listed.

Please immediately inform our centre in writing, by completing the Update of Details Form, of any change to this information. If you have any questions or concerns, please contact our centre.

Primary parent/guardian

Primary guardian is the person responsible for payment of fees.

First name: Middle name(s):

Last name: Preferred name:

Relationship to child:

Do you identify as Aboriginal and/or Torres Strait Islander? (no evidence required)

No Aboriginal Torres Strait Islander

Aboriginal and Torres Strait Islander South Sea Islander Decline to answer

Date of birth: Gender: Female Male Non-Binary/Unspecified

Is your street address the same as your child? Yes No

If **No**: Street Number: Street Name:

Suburb: State: Postcode:

Is postal address same as your street address? Yes No

If **No**:

Suburb: State: Postcode:

Home phone: Mobile phone:

Preferred phone: Email address:

Cultural background (optional):

Occupation:

Name of workplace:

Work phone:

I consent to our centre disclosing my personal information to my child's other Parent/Guardian, if they request a copy of our child's documentation, including but not limited to the child's Enrolment Booklet, Additional Contact Forms, Sign In/Sign Out Records, Incident Reports, Administration of Medication Record, and the requested documentation contains my personal information.

Yes No

4. Parent/guardian details (continued)

Parent/guardian 2

First name: Middle name(s):

Last name: Preferred name:

Relationship to child:

Do you identify as boriginal and/or Torres Strait Islander? (no evidence required)

No Aboriginal Torres Strait Islander

Aboriginal and Torres Strait Islander South Sea Islander Decline to answer

Date of birth: Gender: Female Male Non-Binary/Unspecified

Is your street address the same as your child? Yes No

If **No**: Street Number: Street Name:

Suburb: State: Postcode:

Is postal address same as your street address? Yes No

If **No**:

Suburb: State: Postcode:

Home phone: Mobile phone:

Preferred phone: Email address:

Cultural background (optional):

Occupation:

Name of workplace:

Work phone:

5. Additional contacts/authorised person

Important: Please provide details for a minimum of two (2) additional contacts/authorised persons other than those listed as a parent/guardian. Government regulations state child enrolment records must include the contact details for the additional/authorised persons to collect the child.

Additional contacts/authorised persons will need to show photo ID to prove their identity when picking up your child. Please ensure you advise your additional contacts that our centre may contact them in the event of an emergency situation.

Additional Contact 1

First name: Middle name(s):

Last name: Preferred name:

Relationship to child: Date of birth:

Gender: Female Male Non-Binary/Unspecified

Home address: Street Number: Street Name:

Suburb: State: Postcode:

Home phone: Mobile phone:

Preferred phone: Work phone:

Email address:

This person is aware that I am nominating them as an additional contact for my child and that I am providing their personal information to your centre for this purpose.

Yes No

I authorise Additional Contact 1 to (select all that apply):

Deliver and collect my child from this centre

Be notified of any emergency involving my child if I cannot be immediately contacted

Consent to medical treatment including the administration of medication to my child if I cannot be immediately contacted

Authorise a teacher/educator to take my child outside this centre and to transport my child or arrange transportation of my child (e.g. an excursion).

5. Additional contacts/authorised person (continued)

Additional Contact 2

First name: Middle name(s):

Last name: Preferred name:

Relationship to child: Date of birth:

Gender: Female Male Non-Binary/Unspecified

Home address: Street Number: Street Name:

Suburb: State: Postcode:

Home phone: Mobile phone:

Preferred phone: Work phone:

Email address:

This person is aware that I am nominating them as an additional contact for my child and that I am providing their personal information to our centre for this purpose.

Yes No

I authorise Additional Contact 1 to (select all that apply):

Deliver and collect my child from this centre

Be notified of any emergency involving my child if I cannot be immediately contacted

Consent to medical treatment including the administration of medication to my child if I cannot be immediately contacted

Authorise a teacher/educator to take my child outside this centre and to transport my child or arrange transportation of my child (e.g. an excursion).

6. Medical, health and wellbeing

Child's Doctor

Name:

Address:

Phone: Email:

Immunisation

Our centre collects information regarding your child's immunisation status. In the event of a disease outbreak, it helps us quickly identify children who have not been immunised who may need to be temporarily excluded from the centre, until the risk of infection has passed.

In the unlikely event of vaccine-preventable disease, Queensland Public Health may advise our centre that children who have not been immunised may need to be temporarily excluded from the centre. If this happens and your child is not immunised, your child may not be able to attend.

Has your child received ALL of the recommended immunisations for their age? Yes No

Regardless of the option selected above, please provide a copy of your child's official immunisation record which can be obtained from [Medicare Online \(https://my.gov.au\)](https://my.gov.au) or the [Australian Childhood Immunisation Register \(www.servicesaustralia.gov.au\)](http://www.servicesaustralia.gov.au), or a letter from a registered General Practitioner or Immunisation Nurse. If your child's immunisation records are from another country or your child was immunised in another country please seek advice from a registered Medical Practitioner.

If your child's immunisation records are from another country or your child was immunised in another country please seek advice from a Medical Practitioner.

Medical conditions

Our centre is committed to supporting the inclusion of children with medical conditions. We follow our [Medical Conditions Procedure](#) (available on our website). If your child has a diagnosed medical condition/s, we require a copy of your child's current Medical Management Plan* and a meeting with you to complete additional paperwork prior to your child's first day at our centre. It is important to know that our employees may need to undertake specialist training before your child can start.

Reminder: If your child has any of these conditions our employees may need to undertake specialist training before your child can start.

Anaphylaxis

Yes No

If **Yes**, please provide a current Medical Management Plan* and tell us more:

Asthma

Yes No

If **Yes**, please provide a current Medical Management Plan* and tell us more:

Diabetes

Yes No

If **Yes**, please provide a current Medical Management Plan* and tell us more:



6. Medical, health and wellbeing (continued)

Epilepsy

Yes No

If **Yes**, please provide a current Medical Management Plan* and tell us more:

Allergy

Yes No

If **Yes**, please provide a current Medical Management Plan* and tell us more:

Medication

Does your child require regular medication while attending our centre?

If Yes, Yes No

If **Yes**, please provide a current Medical Management Plan* and tell us more. It is important to know that our employees may need to undertake specialist training prior to your child commencing.

Other medically diagnosed medical condition(s)

Yes No

If **Yes**, please provide a current Medical Management Plan* and tell us more:

Specialised Health Procedures

Does your child require a specialised health procedure to be administered while attending the centre?
e.g. medication administered by injection (except for EpiPen), tube feeding, tracheostomy care.

Yes No

If **Yes**, please provide a current Medical Management Plan* and tell us more. It is important to know that our employees may need to undertake specialist training prior to your child commencing:

Hospitalisation

Yes No

If **Yes**, please tell us more:

*Medical Management Plans must be signed by a registered medical practitioner and dated within the last six (6) months.

Dietary requirements or restrictions

Does your child have any specific dietary requirements or restrictions?

Yes No

If **Yes**, please tell us more:

7. Additional needs

Our centre collects information regarding your child's additional needs. It helps us plan a positive and supportive transition for your child into our centre. Has your child been assessed, identified and/or diagnosed with a:

- disability or impairment Yes No
- gift or talent Yes No
- learning, speech, language developmental disorder or difficulty Yes No
- behavioural and/or emotional difficulty or disorder Yes No

Is your child currently undergoing specialist assessment for a suspected additional need?

Yes No

Does your child currently have a National Disability Insurance Scheme (NDIS) plan or access support through the NDIS?

Yes No

If **Yes**, please tell us more:

8. Living and care arrangements

Our centre acknowledges that each family's living and care arrangements are unique. Please provide us with copies of any court orders, parenting orders, parenting plans and/or other official directives relating to you or your child that we need to be aware of, to best support your child.

Are you the parent/guardian (see pg. 3 glossary of terms) of the child? Yes No

Are there any applications before any court relating to parenting arrangements regarding this child? Yes No

Are there any court orders, parenting orders and/or parenting plans or other directives in place that name the child? Yes No

If **Yes**, please provide copies of all relevant documentation

Does anyone else have day-to-day care of the child being enrolled, who is not a parent/guardian or specified in a court order, parenting order and/or parenting plan or other directive? Yes No

Is there anyone legally denied access to the child? Yes No

If **Yes**, please provide copies of all relevant documentation

Name Relationship to child

Name Relationship to child

Name Relationship to child

Name Relationship to child

If you have answered **Yes** to any of the above questions, please provide further information:

9. Declaration and consent

I authorise an employee of the centre to seek:

- medical treatment for my child from a registered medical practitioner, hospital or ambulance service; and
- transportation of my child by an ambulance service.

I authorise and consent to:

Trained centre staff to provide first aid to my child, if required while they are in attendance at our centre.

Yes

Our centre encourages you to seek medical advice prior to answering any of the following questions.

I authorise and consent to:

An employee applying and/or administering the following to my child in accordance with the relevant policy:

- | | | |
|--|------------------------------|-----------------------------|
| a. SPF50+ broad spectrum water resistant sunscreen | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| b. insect repellent (0% DEET) | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| c. band-aids | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| d. one single dose of liquid paracetamol
(verbal permission will also be sought) | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| e. Adrenaline (EpiPen) for the emergency first aid
treatment of children experiencing a severe allergic
reaction for the first time while attending our centre | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| f. Salbutamol inhaler (Ventolin) for the emergency first
aid treatment of children experiencing acute asthma
for the first time while attending our centre | <input type="checkbox"/> Yes | <input type="checkbox"/> No |

Please speak with the centre director if you have further questions regarding the above authorisations.

Photography, Video and Audio Recording Permission

Our centre uses photography, video and audio recordings to capture your child's learning that occurs at our centres and through our online program.. This content is 'personal information' and we manage it in accordance with our Privacy Policy. It is primarily used in the delivery of our education and care programs and to keep you informed of your child's progress. We may also use it for other purposes like the promotion and marketing of our centre through our website or social media.

We respect each child's right to privacy and your right to manage personal information on their behalf. We offer the following levels of consent (please tick your preferred permissions):

Educational Program (Internal Use)

I consent to photographs, videos and/or audio recordings of my child being taken for the purpose of my child's participation in your education and care program at the centre, (for example - for display at the centre, in their own learning portfolio, in other children's learning portfolios, on our online portal for families (if applicable) and in centre resources and for use in our internal forums and professional development which is available to our centre employees, C&K affiliated centre employees and C&K employees, for professional development purposes

Marketing and Social Media (External Use)

I consent to photographs, videos and/or audio recordings of my child to be taken and used in accordance with the centre's [Privacy Policy](#) for external purposes such as publication on our centre's website or social media accounts, for marketing purposes using various online/digital channels or use in external presentations or print material such as advertising posters or newspaper articles.

9. Declaration and consent (continued)

No Permission

I do not give my consent to photographs, videos and/or audio recordings of my child being taken for any purpose.

You may change your consent at any time by advising our centre in writing.

Disclosure of personal information

I **understand** the Privacy Data Collection Statement included with this Enrolment Agreement and acknowledge the information I share with the centre about my child, my child's parent/guardians and my child's attendance will be shared with authorised third parties in accordance with this statement.

Yes

Documentation to be provided

Please provide a copy of the following documents to the centre prior to your child starting, to ensure that your child's enrolment meets all legislative requirements:

Child Details:

Proof of Date of Birth

Medical:

Immunisation record

Medical Management Plan for any medical condition listed

Living and care arrangements (if applicable):

Court Orders, Parenting Orders, Parenting Plans, or any directives naming your child

I understand that it is my responsibility to provide copies of the documents listed above to the centre, prior to my child starting.

10. Enrolment Agreement

Terms

I agree to abide by these enrolment agreement terms and to ensure that my authorised contact persons will also abide with these terms.

I confirm I have lawful authority and/or parental responsibility for the child nominated in this Enrolment Booklet.

Update of Details Form

I confirm the information provided in this Enrolment Booklet is true and correct and can be relied upon by our centre.

I agree to promptly complete an Enrolment Change of Details Form to notify the centre of any change to the information provided, including but not limited to additional contacts/authorised persons, medical conditions and living and care arrangements.

Policies

I acknowledge that key centre policies and procedures for families are available to access at the centre.

I acknowledge that I and my authorised contacts will abide by the centre policies and procedures, including but not limited to the centre's Parental Code of Conduct and Privacy Policy.

Attendance

I accept the services and facilities that the centre provides to care for my child.

I will ensure that my child is delivered to and collected from the centre by myself or my authorised contact, and my child is:

handed over to a centre employee, and

signed in on delivery to, and signed out on collection from, the centre.

I acknowledge the centre may refuse any person from collecting my child if the situation at the time of collection is deemed to place the child at risk.

Enrolment

I agree that my child's enrolment with the centre starts on the commencement date and continues until terminated in accordance with centre policy.

Medical conditions

I accept a decision made by the centre that my child is contagious or too ill to attend a centre is final. I agree to collect my child promptly after being informed of such a decision.

I agree to provide the centre with my child's current and any updated medical information, including any new or changed diagnosis, Medical Management Plan, treatment plan or medication. I further acknowledge that it is my responsibility to provide the centre with replacement medication prior to its expiry or usage completion and that my child is unable to attend if the required medications are not provided.

I acknowledge that in order to comply with relevant legislation, if my child has a medical condition, their enrolment will only be able to commence once all required Medical Condition procedural steps have been followed.

Immunisation

I understand that in the unlikely event of vaccine-preventable disease and my child has not been immunised, my child may need to temporarily excluded from the centre, if that is the advice provided to our centre by Queensland Public Health.

I understand I remain responsible for the payment of fees for any booked days my child is unable to attend.

10. Enrolment Agreement (continued)

Absences

I will promptly notify the centre if my child will be absent and the reason for the absence.

I will promptly notify the centre when my child is suspected of having, or is diagnosed with, an infectious illness.

I understand that fees will continue to be charged for days when my child is absent.

Child protection

I understand that centre employees will make a report to the appropriate authorities if they suspect that a child at the centre has experienced or is experiencing physical, sexual, or emotional harm or is at significant risk of experiencing physical, sexual, or emotional harm or neglect as a result of parent/guardian action or inaction. I further understand that centre employees are not obliged to inform me if a report has been made.

Fees and government subsidies

I acknowledge the centre's Fee Policy contains important information in relation to the payment of fees and cancellation of my child's enrolment.

I confirm I have read and agree to abide by the centre's Fee Policy, which is available at the centre.

I agree to pay all fees payable for my child during my child's enrolment, at regular intervals as per the agreed billing cycle.

I understand that fees are paid in advance either weekly, fortnightly, monthly, or by the term.

I acknowledge fees are payable even if my child does not attend due to illness, holidays, public holidays, or any other reason.

I understand that the centre will provide me with a Customer Account Statement showing my fees owing.

I agree to promptly notify the centre in writing if my financial circumstances change and I cannot pay my fees.

I acknowledge and understand that in the case of non-payment, any enrolment information specifically required for the purpose of debt recovery and identification of individuals in default may be forwarded to a collection agency for legal recovery action which may affect my credit history. I agree to pay for any costs associated with debt collection action taken when my account remains unpaid or in arrears.

I acknowledge that any refund that may be owed to me, will be processed in accordance with the centre's Fee Policy.



10. Enrolment Agreement (continued)

Liability

The centre excludes all implied conditions and warranties from these enrolment agreement terms except any condition or warranty (such as conditions and warranties implied by legislation) which cannot, by law, be excluded. The centre’s liability in respect of the services is limited to:

- i. supplying of the services again; or
- ii. payment of the cost of having the services supplied again.

The centre excludes all implied conditions and warranties from these enrolment agreement terms except any condition or warranty (such as conditions and warranties implied by legislation) which cannot, by law, be excluded. The centre’s liability in respect of the services is limited to:

I acknowledge that, to the maximum extent permitted by law, our centre excludes all liability for any costs, expenses, losses and damages suffered by me, whether that liability arises in contract, tort (including by the centre’s negligence) or under the statute in connection with its provision of the services. Without limitation, the centre will in no circumstances be liable for any indirect or consequential losses, including loss of profits, loss of revenue and loss of business opportunity.

Our centre accepts no responsibility for any loss or consequences if your child has not been vaccinated in accordance with the National Immunisation Program Schedule on the Immunise Australia Program website (www.health.gov.au/health-topics/immunisation).

Governing laws

The laws of Queensland where my child is enrolled apply to these Enrolment Agreement Terms and any services provided by the centre.

Correct and up-to-date information

I confirm the information I have provided in this form is true and correct.

I acknowledge that it is my responsibility to inform the centre, in writing, if any information requires updating, including additional contact and authorised contact information.

Parent’s/Guardian’s name:
.....

Parent’s/Guardian’s name:
.....

Parent’s/Guardian’s signature:
.....

Parent’s/Guardian’s signature:
.....

Date:

Date:

11. Parent Checklist

Have you:

- completed all sections of the enrolment booklet?
- included details of a minimum of two additional contacts?
- accessed, read and understood all sections of the document?
- signed and dated the completed enrolment agreement?

Provided the centre the following documents:

- proof of date of birth for your child? See pg. 3 glossary for document examples
- proof of immunisation status? Regardless of your child's immunisation status, please provide.

A copy of your child's official immunisation record which can be obtained from Medicare Online (www.my.gov.au) or the Australian Childhood Immunisation Register (www.servicesaustralia.gov.au) or a letter from a registered General Practitioner or Immunisation Nurse. If your child's immunisation records are from another country or your child was immunised in another country please seek advice from a registered Medical Practitioner.

If applicable, have you provided:

- a copy of a concession card listing your child's name?
- Medical Management Plan(s)
- specialist report(s) relating to your child's learning and development(s)
- a copy of any court orders, parenting orders, parenting plans, or any directives naming your child?

Please feel free to share any further information here:

For centre/office use only:

Date of enrolment:

Enrolment pattern details:

Centre checklist:

- Enrolment booklet complete
- Proof of date of birth
- Minimum of two additional contacts
- Immunisation record
- Signed and dated booklet

If applicable:

- Eligible for Free Kindy
- Medical management plan(s) signed and dated by a registered medical practitioner
- Custodial orders that are in place
- Letter from a registered medical practitioner outlining a diagnosis for an additional need
- Additional needs care plans/behaviour guidance plans/ESP
- Copy of concession card
- Enrolment data entered into Kidsoft
- Upload enrolment booklet to primary guardian's Kidsoft record, and all other documents to child's record



The Creche and Kindergarten Association Limited

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