

ENROLMENT FORM – HOLIDAY PROGRAMME



KELSEY YARALLA KINDERGARTEN ENROLMENT DATE:

Child Details:

Child's Age:
First Name(s): Last Name:
Ethnic Origin: Iwi:
Date of Birth: Gender: Male Female Age:

Parent/Guardian Title: (Mr/Mrs/Ms/Miss/Dr etc.) **First Contact**

First Name: Middle Name:
Last Name: Daytime Phone:
Address:
E-Mail: Mobile:

Parent/Guardian Title: (Mr/Mrs/Ms/Miss/Dr etc.) **Second Contact**

First Name: Middle Name:
Last Name: Daytime Phone:
Address:
E-Mail: Mobile:

Alternative Contacts

Full Name: Daytime Phone:
Relationship to Child: Allowed to collect: Yes No

Full Name: Daytime Phone:
Relationship to Child: Allowed to collect: Yes No

IN THE EVENT OF AN EMERGENCY, WE WILL SEEK TO MAKE CONTACT IN THE ORDER YOU LIST ABOVE

Custodial Statement

Are there any custodial arrangements concerning your child? Yes No

If yes, please describe:
.....

Person/s who cannot pick up your child:
.....

(Please provide a copy of legal documentation)

ENROLMENT FORM – HOLIDAY PROGRAMME



KELSEY YARALLA KINDERGARTEN

ENROLMENT DATE:

Medical Information:

Doctor: Phone:

Immunisation Certificate Sighted: Yes No

Has your child a special requirement, including illness, allergies or medication?

.....
.....

20 Hours ECE Details: (This option is only available to children aged 3, 4 or 5)

Is your child receiving 20 Hours ECE for up to 6 hours per day, 20 hours per week at this service?

Yes No

Is your child receiving 20 Hours ECE at any other service?

Yes No

To receive this entitlement please confirm and sign that:

* Your child does not receive more than 20 hours of 20 Hours ECE per week across all services.

* You authorise the Ministry of Education to make enquires it deems necessary regarding the information provided in this 20 Hours ECE Details box to the extent necessary to make decisions about your child's eligibility for 20 Hours ECE. You also consent to the early childhood service providing relevant information to the Ministry of Education, and to other early childhood education services your child is enrolled at, about the information collected in the box.

Signed: Date:

Ministry of Education

Fees Details

I have read and understand Dunedin Kindergarten's fee policy and agree to the terms of trade. Yes No

I understand that I will be responsible for any costs additional to attendance. Yes No
(e.g. excursions, visiting performers etc.)

Parent/Guardian/Caregiver – Statement of Understanding	
I understand that the teachers are only responsible for my child during kindergarten hours; I am responsible for seeing that my child gets safely to and from kindergarten.	Yes <input type="checkbox"/> No <input type="checkbox"/>
I give permission for this child to go for walks with the staff in the area around the kindergarten and ratios will be maintained according to the excursion procedure.	Yes <input type="checkbox"/> No <input type="checkbox"/>
I give permission for the teachers to apply first aid and sunscreen to my child, and to change soiled or wet clothing when necessary.	Yes <input type="checkbox"/> No <input type="checkbox"/>
I give permission for my child to be photographed or videoed at the kindergarten for learning-related purposes.	Yes <input type="checkbox"/> No <input type="checkbox"/>
I give permission for any such images to be used for promotion/publicity purposes.	Yes <input type="checkbox"/> No <input type="checkbox"/>
I give permission for my child to access the internet in line with the cybersafety procedure at kindergarten	Yes <input type="checkbox"/> No <input type="checkbox"/>
I have read the sleeping policy.	Yes <input type="checkbox"/> No <input type="checkbox"/>

ENROLMENT FORM – HOLIDAY PROGRAMME



KELSEY YARALLA KINDERGARTEN

ENROLMENT DATE:

Enrolment Details

Date of Entry:/...../.....

Date of Exit:/...../.....

Week 1	Monday 18/07/2011	Tuesday 19/07/2011	Wednesday 20/07/2011	Thursday 21/07/2011	Friday 22/07/2011	
Times Enrolled						Week total hours:
<i>Daily Hours</i>						
<i>20 Hours ECE at this service</i>						Maximum 20hrs per week across all services
<i>20 Hours ECE at another service</i>						
<i>Plus 10 ECE hours</i>						Hourly fee applies

Week 2	Monday 25/07/2011	Tuesday 26/07/2011	Wednesday 27/07/2011	Thursday 28/07/2011	Friday 29/07/2011	
Times Enrolled						Week total hours:
<i>Daily Hours</i>						
<i>20 Hours ECE at this service</i>						Maximum 20hrs per week across all services
<i>20 Hours ECE at another service</i>						
<i>Plus 10 ECE hours</i>						Hourly fee applies

Declaration:

I declare that my child is not enrolled in another Early Childhood Centre at the same times that he/she is enrolled at Kindergarten. (Dual enrolment)

I declare that all the above information is correct and I have the authority to enrol this child. I agree to the terms and conditions as stated.

Signature: Date:

Service Declaration:

On behalf of Dunedin Kindergartens, I declare that this form has been checked and all relevant sections have been completed

Signature: Date:/...../.....

Other Comments:

.....

.....