

Enrolment Agreement Form



School's Out Centre:

Email:

Please select your chosen centre from the dropdown list and it will pre-populate the email address when you tab through or enter into another field

Customer Name:

Child:

Welcome

Thank you for your booking and welcome to the School's Out family.

At School's Out we acknowledge that handing over your precious child/ren to others for their care and welfare can be difficult process. In the effort to ease this situation we would like to invite you to spend some time with us during your first visit so that we can get to know you and your child/ren better. This will provide us with the opportunity to introduce you to the programme, meet the staff and discuss any concerns that you may have.

School's Out's desire is to make sure that your child/ren receive the best experience when they are not with you and to ensure we are able to achieve that we need to obtain some further information from you. This is a requirement of our ongoing accreditation with the Ministry of Social Development and will provide you with peace of mind that you are receiving best-practice service delivery.

You can complete this form online and return to this email address, print it out and fill it in and bring with you during your first visit or alternatively, please come into the centre at your earliest convenience, sit down with a staff member and we can complete the form together.

Unacceptable Behaviour

We have zero tolerance for physical violence, foul language and intentional damage to property or equipment. Parents/caregivers are notified of any disruption caused by their child. If the behaviour is considered a risk to others your child will be removed immediately and excluded from future attendance. In signing this form, you agree to accept the cost of any damage wilfully caused by your child and you agree to pick up your child immediately if his/her behaviour is deemed unacceptable. No refund will apply.

Activities and Excursions

Staff will do their best to ensure a safe experience for your child. However, School's Out staff and volunteers will be free and clear of all liability if any injury, damage or loss is sustained to your child or their personal effects that they have brought to the programme.

My child has permission to participate in activities outside the centre which may include transport in a company approved vehicle: YES NO

My child has permission to participate in water-based/swimming sessions: YES NO

Child's swimming ability: Wading Only Not-confident Confident

Custodial Statement			
Do both parents have day to day care of the child?	YES	NO	
If NO, are there any parenting orders (custodial arrangements) concerning your child?			
Names of any persons who are forbidden to have any contact or restricted contact to this child (A court order needs to be sighted and a copy held on file for our centre to prohibit a parent/guardian from collecting his/her child. Photo to be supplied if possible).			
Name:	Court Order:	YES	NO
Name:	Court Order:	YES	NO

Health			
In the unlikely event of a medical emergency, I understand my child will be taken to hospital in an ambulance if necessary – parents or a contact person will be notified immediately. All medical costs incurred are at the child’s Principal caregivers expense.			
Any child with a fever, rash, sticky eyes, diarrhoea, or vomiting is required to stay home until 48 hours after symptoms settle.			
I agree with the policies and agree to adhere to them relating to my child regarding Infectious Diseases, Sick Children, Safe Pick Up and Access:	YES	NO	
I give permission for my child’s head to be checked for head lice by the Programme Manager or Assistant Manager. I am aware that in the case of my child having head lice, s/he may be asked to stay home until treated:	YES	NO	
I give permission for Arnica Cream, Bepanthen or similar to be applied to bumps and bruises:	YES	NO	
I give permission for the staff to apply a N.Z. approved Sun block to my child:	YES	NO	
I give permission for my child to be given basic First Aid treatment by the staff:	YES	NO	

Medication and Behavioural Care Requirements			
All medications administered to your child by the centre must be handed to the supervisor on arrival at the centre and must be signed in the medication register by a parent or guardian (see Administration of Medicine Policy). For safety reasons, medication must be within the expiry date and if prescribed by a doctor, it must have the correct child’s name on it.			
Does your child have any allergies (food or otherwise), religious dietary requirements,behavioural care requirements or health problems that the centre should be aware of?	YES	NO	
<i>Please provide details <u>and</u> discuss with the Programme Manager (if you require more space please attach separate page).</i>			

OSCAR Subsidy

Do you qualify for a subsidy?

YES NO

It remains your responsibility to ensure your account is always paid in advance and to pay any part of your fees which are not covered by a subsidy. It is your responsibility to keep Work and Income NZ informed of any changes in circumstances or care arrangements. Always ensure your application/renewal is lodged with Work and Income NZ prior to your child attending the programme or prior to the expiry of the current subsidy.

In signing this form, you agree to pay all your child's OSCAR fees, even if your WINZ application is declined for any reason.

Fees

I agree to pay one week's deposit in advance.

I agree to pay fees, as per the current fee schedule, weekly in advance.

I understand that if on an OSCAR subsidy, the child must attend the hours I have applied for.

I agree to pay fees for the time booked whether my child attends or not, including Statutory Holidays falling in term time and sick days in term time and holiday programme.

I agree to pay a 10% penalty (based on the amount owing) if my fees become in arrears. Late payment of fees may result in your child's space being cancelled and all debt collection fees payable by the parent.

I agree to pay a late fee if my child/ren are left at the programme outside operating hours. This will be charged at the rate of \$25 per 15 minutes, with an instant fee of \$5.00.

I agree to the terms and conditions on the Programme's fee schedule.

I agree to give one week's notice in writing when changing or cancelling my child's booking.

In the event of fees being in arrears I acknowledge a late payment fee will be charged in accordance with the current fee schedule issued by the centre. Additionally, I acknowledge I will be liable for interest on all outstanding amounts at the current rate and that all debt collection costs will be charged in addition to fees, interest and late payment charges.

The terms of this agreement are subject to the centre rules and regulations, and as such, rules and regulations may hereafter be amended from time to time.

Payment Agreement

I confirm \$_____ (one week's fees deposit) will be paid in advance before the first day of booking attendance.

By signing this form, I understand my booking is not confirmed until this deposit has been paid.

Declaration

I declare that the information I have provided on this form and the completed online Safety Form via ENROLMY, is true and correct.

Signature of Principal Caregiver: _____ Date: _____

Information provided by parents/guardians on this enrolment form is required for statistical purposes, MSD audits, to ensure contact in an emergency and to facilitate individual care and attention for your child. School's Out follows the principles of the Privacy Act 1993. As required by the Vulnerable Children Act 2014 this information may be shared with appropriate organisations if there are any concerns for the safety of a child or another family member.