



# Early Learning Centre

57 Taylor Street, Pialba 4655. Ph: 07 4124 3544

## ENROLMENT FORM

Commencement Date ...../ ...../ .....

Hours Of Attendance: Mon .....To..... Thurs. ....to .....

Fri .....to .....

**CHILD'S NAME** .....

Preferred Name or Nick-name .....

D.O.B...../.../..... SEX [ ] Male [ ]Female

Child's Residential Address. ....

..... Postcode .....

**NAME OF PARENT/GUARDIAN**.....

Residential address  
..... Postcode.....  
...

Telephone Number..... (Home).....  
(Work)

Occupation  
.....

**FATHER'S NAME** .....

Residential Address .....

Telephone Number .....(Home) .....

Occupation. ....  
.....

**OTHER CHILDREN IN FAMILY:**

Name..... Age.....

Name..... Age.....

Name..... Age.....

**EMERGENCY CONTACT:**

**1. NAME** .....

1

Residential Address.....  
.....

Telephone Number..... (Home)..... (Work)

Relationship to Child.....

**2. NAME**.....

Residential Address.....  
.....Postcode.....

Telephone Number..... (Home)..... (Work)

Relationship to Child .....

If unable to do yourself, who do you authorise to pick up your child?

**1. NAME** .....

Residential Address.....  
.....

Telephone Number.....(Home).....(Work)

Relationship to Child .....

**2. NAME** .....

Residential Address.....  
.....Postcode.....

Telephone Number..... (Home).....(Work)

Relationship to Child.....

## CULTURAL AND RELI&IOUS NEEDS

Where was your child born? .....

Is your child of Aboriginal or Torres Strait Islander decent? [ ] Yes [ ]No

In which country were you born? .....

How long in Australia? .....

What language/s do you and your child speak at home? .....

Are there any cultural or religious beliefs, which we should respect when looking after your child?

.....

.....

## INDIVIDUAL INFORMATION

Does your child have a security toy/dummy etc? .....

Is your child: In nappies [ ]Yes [ ]No Being toilet trained [ ]Yes [ ]No

Needs reminding [ ] Yes [ ]No Goes to the toilet independently [ ]Yes [ ]No

What word does your child use when asking to go to the toilet .....

Has your child been in care before? (Please tick).

[ ] Preschool [ ] Long Day Care [ ] None

[ ] Baby-sitter [ ] Family Day Care, [ ] Other

How do you think your child will react when you leave him/her at the Centre?

.....

Is there anything else you feel we need to know about your child?.....

.....

## SIGNING CHILDREN IN AND OUT

All children must be signed in and out at the 'sign in sheet' located at the entry of the room. Signing children and out of the HBNC Limited Hours Early Learning Centre must be over the age of eighteen. See handbook for alternative arrangements.

## CUSTODY ISSUES/ PARENTAL COURT ORDERS

Name of child

Date

Name of person

## RELATIONSHIP TO CHILD

Give details of any person, known to the child, who does NOT have legal authority to take the child from HBNC Limited Hours, Early learning Centre – located at 57 Taylor Street, Pialba, during the times of 8.30am – 3.15pm.

NAME:

Relationship to child

Details of court order

Copy sighted and retained – ..... Signed

Any changes will need to address personally with the director.

**IMMUNISATIONS**

Age	Vaccine	Date
2, 4 & 6 months	Triple Antigen (DPT) Sabin Vaccine (OPV) Hib Vaccine a,b,c Invasive pneumococcal disease Rotavirus	
12 months	Hib + hepatitis B 2 <b>OR</b> Hib 3 Measles-mumps, rubella 2 Meningococcal C disease Invasive pneumococcal disease (for high risk children)	
18 months	Measles, mumps, rubella (MMR) Haemophilias influenza type b ( Hib Vac)	
4 years	Diphtheria tetanus- pertussis poliomyelitis Measles-mumps rubella 2 Invasive pneumococcal disease (high risk children)	

Record sighted by Director [ ]Yes [ ]NO Date sighted...../...../.....

Director's signature upon sighting above.....

**HEALTH / MEDICAL**

Is your child allergic to anything? If yes, please state what:.....

.....

Is there anything your child must never eat? If yes, please state what:

.....

Are you able to provide the centre with a management plan of the child's allergy?

.....

What is your Doctor's/ Hospital name?.....

Address: .....

Phone No: .....

Does your child need regular medication? If so, please state type.....

.....

Does your child have a continuous serious illness? If yes, please state:.....

.....

Has your child ever been in hospital? If yes, when and for how long? .....

.....

Does your child have any special needs (developmentally or otherwise) that we should be Aware of?.....

## GENERAL NEEDS

Does your child have a special toy *or object during* the day apart from when going to sleep)?

.....  
.....

Does your child have strong fears about anything? (e.g. loud noises etc)

.....  
.....

What soothes your child best when he/she is upset?.....

.....  
.....

What do you love best about your child that you would like us to know?.....

.....  
.....

We are looking forward to caring for your child and welcome the family into the Centre. Please feel free to approach the assistant or myself if you have any suggestions for fundraising, programming or activities. We have an open door policy where you able approach us about the service we are providing. Parent participation is welcomed and encouraged through activities, events and the day to day program and routines. Parent involvement increases the child's security of their surroundings.

Please read the following paragraphs and sign where applicable.

## IMMUNISATION

I certify that the child identified above is up to date for immunisation for his/her age according to the National Health and Medical Research Council recommended immunisation schedule for 0-6 years or is currently on an immunisation catch up schedule.

Name In Full: (Please print) .....

Relationship To Child:.....

.....  
Parent Signature

Date

.....  
Director Signature

Date

**or**

I have a **conscientious objection** to having my **child immunised**. I agree to exclude the child identified Above from Limited Hours Child Car- during outbreaks of infectious diseases i.e. measles, whooping Cough.

Name in Full: (Please print) .....

Relationship to Child: .....

Parent Signature

Date

Directors Signature

Date

**AGREEMENT TO EXCLUDE LIABILITY FOR NEGLIGENCE.** Childcare act 2003 p79

A licensee will not enter into an exclusion agreement with a parent or guardian of a child in care.

## DUTY OF CARE

Duty of care will be maintained at all times between staff and children, with the priority on safety and wellbeing of the child the most important.

**PERMISSION FOR STAFF TO PROVIDE APPROPRIATE MEDICAL ATTENTION**

Although every effort is made to provide a safe environment of your child while in our care at the HBNC: Early Learning Centre. In the event of an accident or illness requiring emergency medical treatment, every effort will be made to contact the parents before such treatment is sought.

However, should this prove impossible, it will be necessary for authority to be given so that emergency treatment to be undertaken. Parents are asked to complete and sign the following.

I, ..... **Authorise** the staff at Hervey bay Neighbourhood centre: limited Hours Early Learning Centre to provide/seek emergency medical treatment for my child ..... should this be considered necessary.

Parent's Signature: ..... Date: .....

Witness' Signature: ..... Date: .....

**PERMISSION FOR STAFF TO TAKE CHILDREN ON LOCAL EXCURSIONS**

**Any Excursion away from the HBNC: Limited Hours Early learning Centre needs permission from the Centre Coordinator with a planned written outline containing details of where to, how long away from the centre and returning time and activities that will be undertaken. All excursions require extra staff/ volunteers for child staff ratio due to multi ages.**

I give/ not give permission for my child ..... To participate in excursions from the Centre either by foot, bus or public transport, within the local area and I am willing to be a volunteer for such excursions.

(Parents will receive a separate permission form and an explanatory note for all excursions)

Parent's Signature: ..... Date: .....

Witness' Signature: ..... Date: .....

**PERMISSION TO TAKE OBSERVATIONS AND PHOTOGRAPHS FOR THE PURPOSE OF CHILD DEVELOPMENT, CHILD PORTFOLIO AND SPECIAL INTEREST ACTIVITIES BY STAFF AND DIRECTOR.**

**NB. No photographs will be taken on mobile phones at any time and parents have the ability to refuse photographs to be taken of their child during specific events or times.**

I/We **agree** that the **staff and director of the Hervey Bay Neighbourhood Centre; Early learning Centre** are able to take photographs and take observations of my child for the purpose of child development only. Photographs may only be used for the distinct purpose of child development, special interest and portfolios.

Name in Full: Please print-----

Relationship to Child-----

Parent Signature-----

Date-----

Director Signature-----

Date -----

For **media purposes and student observations** (TAFE, USQ, Urangan State High School) a separate permission form will made available.

I/We **do not give permission** to have observations or photographs taken at any time during my child's stay at the Hervey Bay Neighbourhood Centre; Early learning Centre.

Child's name-----

Date-----

Parents Name-----

Parent Signature-----

I/We have received/ downloaded the parent handbook. Signed \_\_\_\_\_

<http://www.hbnc.com.au/joomla/content/category/5/42/128>

## **6) NUTRITION POLICY (TAKEN FROM THE HAND BOOK)**

Healthy eating is important to a child's growth and wellbeing. Our policy is to encourage healthy choices at morning tea, lunch and afternoon tea.

- Children maybe bottle-fed during Care. However if prepared bottles are used please label and notify the staff before placing in the fridge. Staff is able to make up bottles for the babies, specific directions will be required (see babies bottle form). Also let staff know if the child does not drink cow's milk.
- We encourage healthy eating habits at L.H.C.C. by providing food that easy to consume and appetising. These could be sandwiches, crackers, cheese, fruit, custard, yoghurt, milk, juice, muesli bars, dried fruit, baked beans, spaghetti, etc. Enough food is important also, please pack more than they would eat at home as we have morning tea, lunch and afternoon tea. We do not keep food on the premise.  
A water bottle is also important, the children are able to access this at any time during the day and they are encouraged to drink water, please label.
- Glass bottles break, and savoury snacks like chips, twisties, candy bars are not encouraged, soda or fizzy drinks are not an acceptable choice so please refrain from putting these items in their lunch boxes.

What to bring on the day:

- ✓ Spare clothes
- ✓ Lunch, morning tea – more than they would eat at home
- ✓ Juice/milk
- ✓ Water bottle
- ✓ Special item (cuddly toy, dummy, blanket) for sleep or stressful times
- ✓ Socks for cold days
- ✓ Hats
- ✓ Any special instructions you may have concerning your child

Please remember to sign in your child and sign them out, this is a regulation of the Department of Communities

**)(Please remove and keep in a handy place for reference**

**Policy for children attending nut free environment**

As carers for your children we want to offer the best care for a healthy and safe environment.

Attending a nut free (or any allergy) environment ensures that any child with a known or yet to be diagnosed allergy is able to attend with confidence. While all care is undertaken to ensure parents understand the requirements I have provided a web page that can be accessed to provide a more in depth and comprehensive understanding of the allergy.

All cooking recipes are presented to parents to ensure ingredients will not pose a problem.

What does this mean to us?

: No sandwiches, cakes, biscuits with nuts - peanuts, hazelnuts, pecan, coconut, walnut, etc....

: No individual muesli bars that contain nuts, nut bars, packets nuts, Coconut covered cakes, coconut covered bars, and anything that states 'may contain nuts'.

Please note: while we sit together for meals, sharing food is not allowed or encouraged and there is no random eating while doing something else. All eating is done sitting down for the purpose intended and hands are washed afterwards. Staff does check lunchboxes for inappropriate items which are removed and placed in child's school and parents are informed. If unsure at any time please ask.

I have a print out available (from the web) to read or look up from Education Queensland.

<http://education.qld.gov.au/schools/healthy/docs/anaphylaxis.pdf>

## **POLICY FOR ALTERNATIVE PICKING UP OF CHILDREN FROM LHCC**

**Your children's safety is paramount to this Centre and there are steps in place so that the children, parents and staff are protected.**

Introduce the staff to members of the family or friends; invite them in to see the centre, other children interacting with your child. This includes fathers, uncles, aunts, and grandparents.

**Enrolment details:** keep details current and up to date, it doesn't matter how many changes happen or how often. Phone numbers, mobile phone numbers, contacts, custody details are all important to the safety of the children and carers.

**Emergency contacts** are placed on the enrolment form so that if there comes a time the primary caregivers are unable to pick up or deliver your child there is someone that is trusted and known by all parties.

**What do you do when there are no emergency contacts available (this is not uncommon when we are new to town)?** Get to know other parents at the centre, use contacts at playgroups, schools, library, and partner's workplace.

As soon as you feel this is a person that you could use please introduce them to the staff, we need to know whom you trust and become familiar with them. After all, we need to trust them as well.

**To pick up a child that is not the enrolment form or unfamiliar to the Director** the primary caregiver will need to write a note stating that this person is allowed to pick up the child on this particular day and sign it. Also try and let the Director know before the pickup so that she is aware of what is happening.

### **Information required:**

I Jane Smith of address and phone number allow Mary Quitecontrary and phone number to pick up Ben Smith from Limited Hours Childcare on 1<sup>st</sup> April 2006, and then **sign the note**.

On picking up the child they will be asked for identification of a drivers license and this will be noted on the letter or sign in sheet. This must be produced to the Director.

We as staff and caregiver need to feel confident when we are handing over someone else's child to a person unknown to them but known to the family.

**Please help us help you and keep the children safe in a safe environment.**

**Anne Dickey**  
**Director**