

# Finger Prints Children's Centre

Cnr Harry Mills Drv & Alice Bowden Crt Worongary 4213

Ph/Fax: (07) 5530 2393



*A child's world; where creative play is the real work*

PH: (07) 5530 2393 MOB: 0405 106 750 AGES: 3-6 Years

## Enrolment Form

<b>Child's Name:</b>	Child's Centrelink Customer Reference Number:
<b>DOB:</b> ___/___/___	Days required: M T W or TH FR
Sex: M/F	Religion:
Date of Enrolment: ___/___/___	Date of first Attendance: ___/___/___
<b>Australian Indigenous background Yes/No</b>	<b>Torres Straight Island or Aboriginal</b> (Please circle)
<b>Residential Address:</b> _____	
<b>Post Code:</b> _____	
<b>Child's Health:</b>	
<b>Medical Conditions:</b>	
<b>Allergies:</b>	
<b>HealthCare Card Number:</b> _____	<b>Doctor's Name:</b> _____
<b>Medicare Number</b> _____	<b>Address:</b> _____
	<b>Phone:</b> _____
<b>Immunisation:</b> Yes/No <b>Please attach copy of Immunisation/Conscientious Objection form for our records.</b>	
<b>Special Needs:</b> Yes/No (Physical, Religious, Cultural)	
Other Information: (Sleeping, special names)	
<b>Primary Language:</b> Spoken by parents/child: _____	
Is there another language spoken at home? _____	
<b>Court/Access Order in place?</b> Yes/No ( if yes, please discuss this with the Director and attach a copy of the order)	
What year is your child enrolled for Prep? _____ Is this at Silkwood Yes/No	
<b>1: Custodial Parent/Guardian #1</b> (Parent/Guardian registered for Family Assistance)	<b>2: Custodial Parent/Guardian #2</b> Authority to Collect child - Yes No (please circle)
<b>Name:</b>	<b>Name:</b>
<b>Address:</b>	<b>Address:</b>
<b>Home Phone:</b> _____ <b>Work:</b> _____	<b>Home Phone:</b> _____ <b>Work:</b> _____
<b>Mobile:</b> _____	<b>Mobile:</b> _____
<b>DOB:</b> ___/___/___	<b>Siblings:</b>
<b>Marital Status:</b>	<b>Do any siblings attend another Centre? Yes/No</b>
<b>Centrelink Customer Reference Number:</b>	<b>Email:</b> (For Accounts/Newsletters)

<b>Emergency Contact Person &amp; Authority to Collect (Other than parents)</b>	
<b>1. Name:</b>	<b>2. Name:</b>
Relationship to Child:	Relationship to Child:
Address:	Address:
Phone:                      Mobile:	Phone:                      Mobile:
<b>3. Name:</b>	<b>4 Name:</b>
Relationship to Child:	Relationship to Child:
Address:	Address:
Phone:                      Mobile:	Phone:                      Mobile:

<p><b>Ambulance Consent:</b> I give permission for my child _____ to travel by ambulance to hospital and agree to cover all costs incurred. Signed: _____ Dated: _____ Relationship to Child: _____</p>
<p><b>Paracetamol Consent:</b> I give permission for my child _____ to receive one dose (as per manufacturer's instructions) of Paracetamol if my child has a temperature of 38 degrees (or above) and I cannot be contacted. Signed: _____ Dated: _____ Relationship to Child: _____</p>
<p><b>Photos for Observations, Centre Displays and Children's Portfolios - Consent:</b> At Finger Prints, your child will receive a portfolio of their achievements, observations and many photographs that are taken throughout the year. However, many photos are taken as group observations and have other children who attend Finger Prints, pictured in the photo. For privacy and respectful reasons, your authorisation is needed to allow your child's photo to appear in group observations which will be in other children's portfolios, Centre displays and also our daily diary book. <b>I give permission for my child _____ to be displayed in the Centre's daily diary, displays and in other children's portfolios.</b> Signed: _____ Dated: _____</p>
<p><b>Centre Observations:</b> I give permission for my child _____ to be the subject of observations for training, programming and developmental checks required under legislation. Further consent will be sought if questioning and/or testing is undertaken. Signed: _____ Dated: _____ Relationship to Child: _____</p>

**Permission for Staff to Act in Case of an Emergency or Accident:**

Although every care will be taken of your child while at the Centre, the staff can in no way be held responsible for any accident which may occur. In the event of an accident or illness requiring emergency medical treatment, every effort will be made to contact the parents/guardians before such treatment is sought. However, should this prove impossible, it will be necessary for authority to be given for treatment. Parents are asked to complete and sign the following:

I \_\_\_\_\_ authorise the staff of Finger Prints Children's Centre to seek emergency medical treatment for my child \_\_\_\_\_ should this be considered necessary.

**Exclusion of an Unimmunised Child:**

I \_\_\_\_\_ am aware that an exclusion period of 21 days will be required for my child (unimmunised/or not up to date with immunisation) if an outbreak of a notifiable disease occurs within the Centre.

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

**Furthermore I have read and agree to abide by conditions of use of the Centre outlined in the Parent Handbook and Policy Manual (located in the office) and do accept such responsibility as Enrolment at the Centre imposes.**

Signed: \_\_\_\_\_

Date: \_\_\_\_\_

Witnessed: \_\_\_\_\_

Date: \_\_\_\_\_

**Please take the time to read and fill this in thoroughly as all of this information is relevant and required. Thank you.**

## Finger Prints Children's Centre Terms & Conditions

### 1. Default & Consequences of Default

1. Interest on overdue invoices shall accrue daily from the date when payment becomes due, until the date of payment, at a rate of two and one half percent (2.5%) per calendar month and such interest shall compound monthly at such a rate after as well as before any judgment.
2. If the Parent/Guardian defaults in payment of any invoice when due, the Parent/Guardian shall indemnify Finger Prints Children's Centre from and against all costs and disbursements incurred by Finger Prints Children's Centre in pursuing the debt including legal costs on a solicitor and own client basis and Finger Prints Children's Centre collection agency costs.
3. Without prejudice to any other remedies Finger Prints Children's Centre may have, if at any time the Parent/Guardian is in breach of any obligation (including those relating to payment); Finger Prints Children's Centre may suspend or terminate the supply of Childcare to the Parent/Guardian and any of its other obligations under the terms and conditions.
4. Finger Prints Children's Centre will not be liable to the Parent/Guardian for any loss or damage the Parent/Guardian suffers because Finger Prints Children's Centre has exercised its rights under this clause.
5. If any account remains overdue after thirty (30) days then an amount of the greater of twenty dollars (\$20.00) or ten percent (10%) of the amount overdue (up to a maximum of two hundred dollars (\$200.00) shall be levied for administration fees which sum shall become immediately due and payable.
6. Without prejudice to Finger Prints Children's Centre's other remedies at law Finger Prints Children's Centre shall be entitled to cancel all or any part of any order of the Parent/Guardian which remains unfulfilled and all amounts owing to Finger Prints Children's Centre shall, whether or not due for payment, become immediately payable in the event that:
  - (a) any money payable to Finger Prints Children's Centre becomes overdue, or in Finger Prints Children's Centre's opinion the Parent/Guardian will be unable to meet its payments as they fall due; or
  - (b) the Parent/Guardian becomes insolvent, convenes a meeting with its creditors or proposes or enters into an arrangement with creditors, or makes an assignment for the benefit of its creditors; or
  - (c) a receiver, manager, liquidator (provisional or otherwise) or similar person is appointed in respect of the Parent/Guardian or any asset of the Parent/Guardian.

**2. Privacy Act 1988**

1. The Parent/Guardian and/or the Guarantor/s agree for Finger Prints Children’s Centre to obtain from a credit reporting agency a credit report containing personal credit information about the Parent/Guardian and Guarantor/s in relation to credit provided by Finger Prints Children’s Centre.
2. The Parent/Guardian and/or the Guarantor/s agree that Finger Prints Children’s Centre may exchange information about the Parent/Guardian and the Guarantor/s with those credit providers either named as trade referees by the Parent/Guardian or named in a consumer credit report issued by a credit reporting agency for the following purposes:
  - (a) to assess an application by Parent/Guardian; and/or
  - (b) to notify other credit providers of a default by the Parent/Guardian; and/or
  - (c) to exchange information with other credit providers as to the status of this credit account, where the Parent/Guardian is in default with other credit providers; and/or
  - (d) to assess the credit worthiness of Parent/Guardian and/or Guarantor/s.
3. The Parent/Guardian consents to Finger Prints Children’s Centre being given a consumer credit report to collect overdue payment on commercial credit (Section 18K (1) (h) Privacy Act 1988).
4. The Parent/Guardian agrees that personal credit information provided may be used and retained by Finger Prints Children’s Centre for the following purposes and for other purposes as shall be agreed between the Parent/Guardian and Finger Prints Children’s Centre or required by law from time to time:
  - (a) provision of Goods and/or Services; and/or
  - (b) marketing of Goods and/or Services by Finger Prints Children’s Centre, its agents or distributors in relation to the Goods and/or Services; and/or
  - (c) analyzing, verifying and/or checking the Parent/Guardian’s credit, payment and/or status in relation to provision of Goods and/or Services; and/or
  - (d) processing of any payment instructions, direct debit facilities and/or credit facilities requested by Parent/Guardian; and/or
  - (e) enabling the daily operation of Parent/Guardian’s account and/or the collection of amounts outstanding in the Parent/Guardian’s account in relation to the Goods and/or Services.
5. Finger Prints Children’s Centre may give information about the Parent/Guardian to a credit reporting agency for the following purposes:
  - (a) to obtain a consumer credit report about the Parent/Guardian; and/or
  - (b) allow the credit reporting agency to create or maintain a credit information file containing information about the Parent/Guardian.

**3. Payment**

All invoices must be paid within 7 days of when they were issued.

Parent/Guardian’s name (print): .....

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

Parent/Guardian’s name (print): .....

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

## Specific Information relating to your Child's Enrolment at this Centre

Your child will be enrolled at Finger Prints Children's Centre. We are a one room Centre with age grouping 3yrs to 5yrs/school age with a maximum capacity of 24 children.

Your child's care giver details as at the date of Enrolment are as follows:

<b>Position:</b>	<b>Name:</b>	<b>Days:</b>	<b>Qualifications:</b>
Nominated Supervisor/Educator	Kate Harris	Mon -Wed Thurs/Fri (Assistant)	Diploma - Children's Services
Educational Leader/Certified Supervisor	Amanda Driessen	Thur/Fri	Advanced Diploma - Children's Services (Currently studying a B.Ed-EC)
Educator/Certified Supervisor	Jacquelyn Lucas	Thurs/Fri	Diploma - Children's Services
Educator	Kanako Hill	Mon -Wed	Cert III - Children's Services (Currently studying Diploma)
Approved Provider /Management/Educator/ Administration	Rebekah Harrison	Mon -Wed & Fri	Advanced Diploma - Children's Services

A notice stating the current information is located on the wall near the front door.

Finger Prints Children's Centre is operated by Adam Brown and Rebekah Harrison ATF Adbek Family Trust and is licensed under the Education and Care Services National Law 2010 and must comply with this Law and National Regulation 2010 including requirements relating to activities, experiences, programs, staff members qualifications, numbers of staff members and children.

Any complaints or compliance issues regarding our Centre can be directed to **The Office for Early Childhood Education and Care: Ph 07 5562 4877 (Robina) or the Child Care Information Service: 1800 637 711 (refer to Centre Grievance Policy and Procedure [www.fingerprintscentre.com.au](http://www.fingerprintscentre.com.au) (Parent Handbook)**

You are encouraged to ask Educators for information relating to the following:

- : Your child's enrolment at this service including the activities and experiences provided by this Centre
- : The Centre philosophy about learning and child development outcomes and how it is intended the outcomes will be achieved
- : The goals about knowledge and skills to be developed through activities and experiences
- : And any other concerns that you may have relating to your child whilst attending this Centre

Welcome! We hope you enjoy your time with us at Finger Prints!

Yours Sincerely,

Rebekah Harrison (Licensee) 0405106750

**Daily Checklist for Finger Prints: - Please label EVERYTHING...**

**In your school bag there should be:**

\*A cot size fitted sheet with top sheet/blanket (depending on the season) and a very small pillow if desired. You may also bring a special rest time comfort (cuddle toy etc) if needed

\*2 pieces of fruit

\*Labelled spare clothes

\*Wide brimmed hat

\*Inside soft soled shoes

\*Lunch pail with a healthy assortment

\*Afternoon Tea - a separate labelled paper bag with a non perishable snack

\*Stainless Steel (if possible) drink bottle with lid - water only (this is for afternoon tea)

Colours of the day: Monday Tuesday Wednesday Thursday Friday