

Enrolment Agreement Form Sunny Side Early Educare

NSN Number:

APT:

Enrolment Information, **20 Hours ECE** Enrolment Hours and Attestation Information for Early Childhood Education Services / **Non 20 ECE Enrolments Hours**

◆ Sections marked with this symbol are required to be included in every Enrolment Agreement Form (20 Hours ECE sections are not applicable if the service does not offer 20 Hours ECE).

2 Horne Street, Hamilton central, Hamilton. Ph: 07 – 8340635 / 021617588 / Email: ssee@sunnysideece.co.nz Website:www.sunnysideece.co.nz

◆ Child's details:

Child's **official surname** or **family name**:

Child's **official given name**:

Child's **official other names / middle names**:
(please separate names with a comma):

Name your child is known by / preferred name:

Surname / family name:

Given name:

Copy of official identity verification document* collected by staff:

New Zealand birth certificate

Foreign birth certificate

New Zealand passport

Foreign passport

Other _____

Staff initials: _____

Child's date of birth: d d / m m / y yyy

Male

Female

Child's ethnic origin/s:

Iwi your child belongs to:

Language/s spoken at home:

Child's primary residential address:

Post Code:

◆ Privacy Statement:

We are collecting personal information on this enrolment form for the purposes of providing early childhood education for your child.

We will use and disclose your child's information only in accordance with the Privacy Act 1993. Under that Act you have the right to access and request correction of any personal information we hold about you or your child.

Details about your child's identity will be shared with the Ministry of Education so that it can allocate a national student number for your child. This unique identifier will be used for research, statistics, funding, and the measurement of educational outcomes.

You can find more information about national student numbers at: www.minedu.govt.nz/parents

* Information about acceptable identity verification documents is available online at

www.lead.ece.govt.nz and www.minedu.govt.nz/parents.

The Ministry recommends that all services keep a copy of the identity verification document of each child who is enrolled at the service.

Parents / Guardians:	
1. Given names:	2. Given names:
Surname / family name:	Surname / family name:
Address:	Address:
Post Code:	Post Code:
Phone (Home):	Phone (Home):
Phone (Work):	Phone (Work):
Phone (Mobile):	Phone (Mobile):
Email:	Email:
Relationship to child:	Relationship to child:
3. Given names:	4. Given names:
Surname / family name:	Surname / family name:
Address:	Address:
Post Code:	Post Code:
Phone (Home):	Phone (Home):
Phone (Work):	Phone (Work):
Phone (Mobile):	Phone (Mobile):
Email:	Email:
Relationship to child:	Relationship to child:

Additional person/s who can pick up your child:	
Given names:	Given names:
Surname / family name:	Surname / family name:
Address:	Address:
Post Code:	Post Code:
Phone (Home):	Phone (Home):
Phone (Work):	Phone (Work):

Custodial Statement
Are there any custodial arrangements concerning your child?
If YES , please give details of any custodial arrangements or court orders (a copy of any court order is required)

Person/s who <u>cannot</u> pick up your child:	
Name:	Name:
Name:	Name:
Additional Emergency Contacts (also able to pick up child):	
1. Given names:	2. Given names:
Surname / family name:	Surname / family name:
Address:	Address:
Post Code:	Post Code:
Phone (Home):	Phone (Home):
Phone (Work):	Phone (Work):
Phone (Mobile):	Phone (Mobile):
Email:	Email:
3. Given names:	4. Given names:
Surname / family name:	Surname / family name:
Address:	Address:
Post Code:	Post Code:
Phone (Home):	Phone (Home):
Phone (Work):	Phone (Work):
Phone (Mobile):	Phone (Mobile):
Email:	Email:

Child's doctor:	
Name:	Phone:
Name of medical centre:	

Health / Religion	
Illness/allergies/religion	
Is your child up-to-date with immunisations?	<i>Tick One</i> Yes <input type="checkbox"/> No <input type="checkbox"/>
(Please provide verification of all immunisations)	
For staff: Immunisation records sighted and details recorded:	<i>Tick One</i> Yes <input type="checkbox"/> No <input type="checkbox"/>

Medicine

Category (i) Medicines

A category (i) medicine is a non-prescription preparation (such as arnica cream, antiseptic liquid, insect bite treatment) that is not ingested, used for the 'first aid' treatment of minor injuries and provided by the service and kept in the first aid cabinet.

Note: The service must provide specific information about the category (i) preparations that will be used.

Do you approve category (i) medicines to be used on your child? *Tick One* Yes No

Name/s of specific category (i) medicines that can be used on my child, **provided by service**:

- | | |
|----------------|-----------------------|
| ▪ Arnica Cream | ▪ Sudo Cream |
| ▪ Sun blocks | ▪ Johnson Baby Powder |

Parent/Guardian Signature: _____ Date: ____ / ____ / ____

Category (ii) Medicines

Category (ii) medicines are prescription (such as antibiotics, eye/ear drops etc) or non-prescription (such as paracetamol liquid, cough syrup etc) medicine that is used for a specific period of time to treat a specific condition or symptom, provided by a parent for the use of that child only or, in relation to Rongoa Māori (Māori plant medicines), that is prepared by other adults at the service.

I acknowledge that written authority from a parent is to be given at the beginning of each day a category (ii) medicine is to be administered, detailing what (name of medicine), how (method and dose), and when (time or specific symptoms/circumstances) medicine is to be given.

Parent/Guardian Signature: _____ Date: ____ / ____ / ____

Category (iii) Medicines

To be filled in if your child requires medication as part of an individual health plan, for example for an on-going condition such as asthma or eczema etc and is for the use of that child only.

For staff: Individual health plan sighted and a copy taken: *Tick One:* Yes No

Name of medicine:

Method and dose of medicine:

When does the medicine need to be taken: (State time or specific symptoms)

Parent/Guardian Signature: _____ Date: ____ / ____ / ____

◆ Enrolment Details:

Date of Enrolment: ___ / ___ / ___ Date of Entry: ___ / ___ / ___ Date of Exit: ___ / ___ / ___

Please Note:

20 Hours ECE is for up to **six hours per day**, up to **20 hours per week** and there **must be no** compulsory fees when a child is receiving 20 Hours ECE funding.

Bookings exceeding and outside the 20 Hours ECE will be charged accordingly.

Days Enrolled:	Monday	Tuesday	Wednesday	Thursday	Friday	
Times Enrolled:						Total hours:

For 20 Hours ECE fill out boxes below with the hours attested e.g. 6 hours (Age 3 and over only)

20 Hours ECE at this service						Total hours:
20 Hours ECE at another service						Total hours:

Parent/Guardian Signature: _____ Date: ___ / ___ / ___

◆ 20 Hours ECE Attestation:

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

Tick One Yes No

2. Is your child receiving 20 Hours ECE at any other services? Tick One

Yes No

If yes to either or both of the above, please sign to confirm 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 enquiries regarding the information provided in the Enrolment Agreement Form, if deemed necessary and to the extent necessary to make decisions about your child's eligibility for 20 Hours ECE.
- You consent to the early childhood education service providing relevant information to the Ministry of Education, and to other early childhood education services your child is enrolled at, about the information contained in this box.

Parent/Guardian Signature: _____ Date: ___ / ___ / ___

◆ Dual Enrolment Declaration

I hereby declare that my child **is / is not** enrolled at another early childhood institution at the same times that he/she is enrolled at SUNNY SIDE EARLY EDUCARE

Parent/Guardian Signature: _____ Date: ____ / ____ / ____

◆ Optional Charges - **NO OPTIONAL CHARGE**

◆ Statutory Holidays / Term Breaks

This enrolment agreement is **inclusive** of school term breaks.

Please note the centre is **CLOSED** on all public holidays.

Required Information for Licensing Purposes

- **Excursions:** Permission for the child to take part in regular excursions (under the conditions stated in the service's excursions policy).

- **Adult To Child Ratio:** 1 adult to:
 - 4 children for children aged between four years and five years.
 - 2 children for children aged between two years and three years.
 - 2 children for children under two years (in a double pram)
 - 2 children for all children where volumes of water will be accessible.

- **Photo/video:** permission for the child to be photographed for the purposes of assessment, planning and evaluation

SUNNY SIDE will take photos and video of children for the purposes of learning assessment, planning, evaluation and our website page.

I agree for my child's photos or video to be used for: (Please tick)

- Learning Assessment
- SUNNY SIDE Website
- Planning
- Evaluation

Other information possible to include on this Enrolment Agreement Form

- **Policy Statement:** Sunny Side Early Educare has a number of policies that set out the procedures that are in place for the care and education of the children who attend. We strongly urge you to read these. The signing of this enrolment agreement form indicates that you will abide by the policies of this service, and understand how you can have input to policy review.
- **Parent Information Book:** Please ensure you have read the information in the parent handbook as it covers such things as fee details, our latest ERO report, key policies and ways in which we can help you and your child settle into the service. If you did not receive a copy, please request one from the office.
- **Child's strengths, interests and preferences:** Please tell us about your child's strengths, interests and preferences.

◆ Fees Policy

- Fees are to be paid for the 50 weeks that Sunny Side is open each year regardless of illness or family vacation times.
- All fees are GST inclusive and are to be paid by automatic payment on the first day of attendance each week. Weekly or fortnightly payments are welcome but must be paid on the first day of attendance. Fees are to be paid a week in advanced.
- A late fee of \$10 for every 10 minutes will be charged when parents are late to collect their child after the closing time at 6pm.
- Parents agree their child is not enrolled in any other early childhood service on the same time they attend Sunny Side.
- Any fee changes will be entirely at the discretion of the management. Two months notice will be given when such a raise is to occur.
- Parents wanting to hold a space available for any reasons will need to book and pay 50% of the fees to ensure the space will still be available on that day for the future.
- WINZ subsidies are available.
- Sunny Side reserves the right to request at least two weeks' notice before a child is withdrawn from the centre or two weeks fees will be charged.

◆ Fees agreement

In signing this enrolment form, I agree to pay fees on the basis of the fee schedule that is current at the time and I will pay in advance, in accordance with the Fee policy of Sunny Side. I acknowledge and agree to pay the appropriate fees for an enrolled day even if unable to attend due to sickness, absent, I understand and accept that irrespective of any arrangement with any other party(e.g. other adult, Income Support Services, ACC, Trust or Budget service, Etc) to pay the fees, the full responsibility to pay remains with me.

I understand and accept that if any fee or charge remains unpaid beyond the time specified in the fee policy, my child enrollment may be forfeited and the debt passed on to Debt Collection Agency for collection. I accept responsibility for any costs incurred in this process.

Terminating your child's enrolment

Sunny Side Early Educare requires two weeks' notice in writing of termination. This is payable regardless of your child attending or not. If such notice is not given then you are required to pay fees till termination notice is received.

Centre rules and policies

I understand that the terms and conditions noted on this form are not exhaustive and that others are contained in published Sunny Side policy documents, rules, procedures, notices, parents handbook etc. I accept that Sunny Side reserves that right to add, amend, clarify or delete terms, conditions or policies by issuing newsletters, notice or by putting notification on the parents' notice boards.

- I agree to notify Sunny Side Early Educare promptly regarding any absence and the reasons for the absence.
- I have completed the Sunny Side Early Educare enrolment form for my child and agree that all the information contained in it correct as at date of signing.

◆ Parent Declaration

I declare that all the above information is true and correct to the best of my knowledge.

Parent/Guardian Signature: _____

Date: ____ / ____ / ____

◆ Service Declaration

On behalf of Sunny Side Early Educare, I declare that this form has been checked and all relevant sections have been completed.

Service Provider Signature: _____

Date: ____ / ____ / ____