Family Name: _____



Mildura Aquatic Facilities Children's Services Enrolment Information

Sessions:

9am - 12:30pm

Fees:

July 1st2020 – June 30 th2021

Members-	Pricing_
1 Hour	\$4.90
1.5 Hours	\$7.35
Non-Members-	Pricing_
Non-Members-	Pricing_ \$7.90

Crèche sessions are paid for at reception. Please bring your receipt with your child's name on it and hand it to crèche staff as proof of payment.

Staff are to add photo of child/children here →

Bookings:

Bookings can be made by contacting reception. For bookings further in advance, please speak directly with the crèche or reception staff.

Cancellations:

Cancellation of your booking must be received by 7:00am on the day of your booking.

What to Bring:

Your child will need the following items whilst attending crèche:

A healthy snack (children will often eat a healthier option when surrounded by their peers, regardless of age
Fruit, yoghurt, vegie sticks and dips are great options. Nut Free Zone)
A water bottle (we provide spare cups for the occasions when it is forgotten.)
A change of clothes (we strongly believe in children learning through play as it fosters curiosity,
experimentation and imagination whilst engaging all their senses.)
Nappies and Wipes if your child is still in nappies.
A comfort item if you think this will assist your child

Staffing:

All childcare educators working in the crèche are required to have a Certificate 3, Diploma or Bachelor of Early Childhood Education, as well as current First Aid, CPR, Asthma, Anaphylaxis and active Working with Children Checks.

Programming:

Our children's program is developed to accommodate the variety of ages and abilities of all children in our care. We aim to assist children to become independent learners through quality care and educational program. Our team of educators work together to develop a program, that is reviewed and adapted on a daily basis to support the changing needs and interests of the children. Photographic Reflections are displayed on our Reflection and Programming wall. Parental input is highly valued at our service. Please let the staff know, or write a message in our communication diary, and we will implement your ideas where possible.

Behaviour Management:

The techniques we use when dealing with children's behaviour are obviously going to be different than those that are used at home. Our aim is to provide children with a positive atmosphere and to establish opportunities for recognizing and reinforcing appropriate behaviour. When children understand the reasons for limits they are more likely to follow them. Teaching children the reasoning for a limit helps them to gain a better understanding of why the limit is put in place.

Delivery and Collection of Children:

The safety of the children in our care is of the utmost importance. Children are only permitted to be collected by a person who has been listed on a child's enrolment form. For more details or to add additional people to this list after enrolment has commenced, please see one of our childcare educators.

Children's Health and Wellbeing:

To minimise the spread of potentially *infectious diseases* between children, and centre staff, Mildura Waves Creche Educators may exclude children who they deem too ill to attend. This is at the discretion of the educators and Centre Management. More information is available in our Infectious Diseases Policy.

Anaphylaxis:

Anaphylaxis is a severe, life-threatening allergic reaction. We encourage families to avoid brining nut-based products to avoid possible exposure to children with allergies that may attend our service. Children with Allergies/Anaphylaxis/Asthma are required to notify our childcare educators and to provide an Action Plan form a medical professional. A copy of our Anaphylaxis policy is available on our communication board.

Complaints Information:

If you have a complaint or concern, please speak with the Childcare Educators or contact via email at erynn.martin@alignedleisure.com.au

If you are not satisfied with their response, please contact Caitlin Byrne, in person or by phone 03 50 187 500.

If you have been unable to resolve your concerns, please see our complaints information on the Communication Board at the entrance to Crèche.

Immunisation Record:

Mildura Waves Creche Childcare service operates under the 'No Jab, No Play' policy. To have an enrolment confirmed for your child please provide the service with an Immunisation History Statement from the AIR. It must show that your child:

	is up to date with vaccinations for their age OR is on a recognised vaccine catch-up schedule OR has a medical condition preventing them from being fully vaccinated.
Parents	and carers can print a copy of their child's Immunisation History Statement from their;
	myGov account or Call the AIR on phone 1800 653 809 visit a Medicare or Centrelink office. Infirm that all information and detail given on this document is accurate and true.
Signed b	by Parent Guardian: Date:

Ph: (03) 50 187 500

CHILD 1 DETAILS
First Name: Surname:
Date of Birth: Gender: M / F
Home Address:
Country of Birth:
Is your child: Aboriginal Torres Strait Islander Neither
Language(s) Spoken at Home:
CHILD 2 DETAILS
First Name: Surname:
Date of Birth: Gender: M / F
Home Address:
Country of Birth:
Is your child: Aboriginal Torres Strait Islander Neither
Language(s) Spoken at Home:
CHILD 3 DETAILS
First Name: Surname:
Date of Birth: Gender: M / F
Home Address:
Country of Birth:
Is your child: Aboriginal Torres Strait Islander Neither
Language(s) Snoken at Home:

PARENT GUARDIAN DETAILS (1)
First Name: Surname:
Relationship to Child: Country of Birth:
Home Address:
Contact Phone Numbers: (H) (M)
Occupation: (W)
Email:
Does the child live with you? Y/N
PARENT GUARDIAN DETAILS (2)
First Name: Surname:
Relationship to Child: Country of Birth:
Home Address:
Contact Phone Numbers: (H) (A)
Occupation: (W)
Email:
Does the child live with you? Y/N
Please supply a copy of any court orders in relation to the custody and care of your child/children if applicable. Staff to attach.

AUTHORISED PERSONS/EMERGENCY CONTACTS

There may be times when the child has an accident, injury, trauma or illness and the parents or guardians cannot be contacted. To deal with these situations the children's service will notify one of the following people who are authorised to collect and care for the child after accident, injury, trauma, or illness.

Your consent is required to give the people in the following table lawful authority to authorise the taking of the child outside of the premises by a staff member of the service, consent to medical treatment from a registered medical practitioner, hospital, or ambulance, can request/permit the administration of medication to the child.

EMERGENCY CONTACT 1 (OTHER THAN PARENTS)
First Name: Surname:
Relationship to Child:
Home Address:
Contact Phone Numbers: (H) (M)
EMERGENCY CONTACT 2 (OTHER THAN PARENTS)
First Name: Surname:
Relationship to Child:
Home Address:
Contact Phone Numbers: (H) (M)
EMERGENCY CONTACT 3 (OTHER THAN PARENTS)
First Name: Surname:
Relationship to Child:
Home Address:
Contact Phone Numbers: (H) (M)

MEDICAL INFORMATION	
Family Doctor's Practice:	
Family Doctor's Name:	
Address:	
Phone Number:	
MEDICARE NUMBER: Ambulance Cover: Y/N	
Private Health: Y/N	

MORE ABOUT YOUR CHILD
What does your child/children enjoy?
Does your child/children have any fears or dislikes?
Is there any other information you could provide that would assist us with caring for your child/children?
CHILD HEALTH INFORMATION
Is your child/children fully immunised? Y/N
A copy of your child's immunisation record must be sighted by a licenced nominee of the service.
Sighted by: Date: Sign:
Does your child suffer from any allergies? Y/N
Please provide a copy of their current allergy/anaphylaxis action plan signed by your doctor if applicable
For lower severity allergies OR dietary restrictions please provide details below. Staff will require you to complete and sign a sensitivity/medical form to be attached.
Does your child/children have a diagnosed disability or additional needs: Y/N
Please provide details below-
Does your child/children take prescribed medication on a regular basis? Y/N
Please provide details below:
Does your child/children suffer from Asthma: Y/N
Please provide a copy of their current ASCIA action plan signed by your doctor to be attached.

PERMISSIONS- Please circle to authorise the following, and sign below:

I/we give permission to -

Have Band-Aids or the like applied when needed: Y/N

Have staff apply Nappy Cream/Paste (supplied by parent): Y/N

Have staff apply teething gel when requested (supplied by parent): Y/N

Have sunscreen reapplied when necessary: Y/N

Have staff deliver First Aid when necessary, including the use of Ventolin/EpiPen if applicable: Y/N

Signed:

I/we give permission-

For photographs to be taken of my/our child for use within the service Y/N

For photos to be used within the services Learning stories and daily Reflections: Y/N

For display on Mildura Waves Creche private facebook group: Y/N

For promotional use on Mildura Aquatic Facilities social media: Y/N Signed:

I/we:

Have viewed the Mildura Waves Creche (hereafter called the Centre) and consent to the enrolment of my child.

Understand that the person/s nominated as the parent/guardian are the authorised parties to enrol, cancel enrolment, release and authorise the release of the child.

Have read the centre's Parent Handbook and understand that any changes to this will be displayed on the service's Notice Board at the entrance to the service

Agree to comply with all Government Requirements in relation to the Centre and its services

Understand that children who are lowest priority under the Access Guidelines may be required to alter their days and times of attendance at the Centre in order to provide a place for a higher priority child. This Centre's priorities are as follows:

- 1. Disadvantaged Families and Children, Centre Members who are using the facility
- 2. Non-members who are using the Facility whilst their children are in care
- 3. Any other child.

Agree that in the case of an accident or injury, the centre will attempt to contact me/us and where I/we cannot be contacted, medical care and/or ambulance services may be sought, and I/we are liable for any costs incurred.

Are aware that the child will be excluded from the centre if he/she has contracted a contagious disease or condition that may be transferred to other children in care.

Understand that the Centre may require a medical clearance from your doctor before they may return to the Centre.

Agree to provide information in relation to the health of my/our child.

Understand that the centre may be used as a training and observation Centre by students aiming to/already working with young children.

Are aware that the cancellation Policy requires me/us to cancel our booking by 7:00 am on the day of the booked session.

Understand that a system of payment for late collection operates at the Centre, to cover overtime payments for staff, and that I/we are obliged to drop off and pick up our child as negotiated with the Centre. Any Late collection will result in a fee being charged.

I/we have read, understood and agree to abide by the conditions of this enrolment form.

Primary Parent/Guardian name:

Signed: