

Enrolment Agreement Form – Tole Park Community Preschool

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:

Official identification document/s sighted by staff:

New Zealand birth certificate

Foreign birth certificate

New Zealand passport

Foreign passport

Other

Head Teacher/Administrator initials:

Child's date of birth: / /

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:

All early childhood services must meet their responsibilities under the Privacy Act 2020, which include providing a Privacy statement on enrolment agreements which meets the requirements of that Act (see Principle 3 - Collection of information from subject).

Additionally, all Privacy statements must include the exact wording below: Personal information about your child collected on this enrolment form is shared with the Ministry of Education who store it securely and treat it in accordance with the Privacy Act 2020. Information is disclosed to the Ministry:

- for funding allocation purposes
- for monitoring purposes
- to allow the assignment of a National Student Number* to your child, and
- to allow the Minister or Secretary of Education to exercise any of their other powers or responsibilities under the Education and Training Act 2020, and as permitted by Privacy Principles 10 and 11.

Completed forms may also be viewed by Ministry officials on request for the purposes of monitoring and licensing.

* A National Student Number is a unique identifier for your child within the education system. You can find more information about National Student Numbers and what they are used for at National Student Number (NSN) » NZQA Early childhood services can find out more information about NSN assignment – including acceptable identity verification documents – at: National Student Numbers (NSN) – Education in New Zealand

The Ministry recommends keeping a record of identity verification documents that have been sighted, but not retaining copies of identity verification documents, which if received, should be securely destroyed once verified.

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	
Illness/allergies:	
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?	<i>Tick One</i> Yes <input type="checkbox"/> No <input type="checkbox"/>
Name/s of specific category (i) medicines that can be used on my child, provided by service:	
<ul style="list-style-type: none"> ▪ Cancer society sunblock SPF 50 	<ul style="list-style-type: none"> ▪ NaturoPharm Arnica Plus cream
<ul style="list-style-type: none"> ▪ Weleda Burns and Bites cooling gel 	<ul style="list-style-type: none"> ▪ Bepanthen/Sudocrem
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.	
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:	<i>Tick One:</i> Yes <input type="checkbox"/> No <input type="checkbox"/>
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: / /

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

For 20 Hours Free ECE for 3-5 year olds fill out boxes below with the hours attested e.g. 6 hours

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

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

Parent/Guardian Signature: _____ Date: / /

20 Hours Free ECE Attestation:

1. Is your child receiving 20 Hours Free 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 Free 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 Free 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 Tole Park Community Preschool 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 form.

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 Tole Park Community Preschool.

Parent/Guardian Signature:

Date: / /

Statutory Holidays / Term Breaks:

At Tole Park Community Preschool are open for all school holidays. We do close for a period of a few weeks over the Christmas holidays. Dates vary each year and are communicated in the final term.

We are closed on the following public holidays if they are observed on a weekday:

- New Year's Day
- Easter Monday
- Good Friday
- Labour Day
- Day After New Year's Day
- ANZAC Day
- Christmas Day
- Boxing Day
- Waitangi Day
- King's Birthday
- Matariki
- Auckland Anniversary

Required information for Licencing Purposes

Local Excursions: At Tole Park Community Preschool we like to support learning in our community. Our local excursions are to the following places:

- Tole Park **Y/N**
- Ponsonby Community Centre building and grounds **Y/N**
- Leys Institute Little Library **Y/N**

The risk assessments for both venues are in our policy manual at the front entrance way.
Ratios for local excursions are: 1:4 for over 2-year-olds.

Parent/Guardian:

Signature:

Date: / /

Photo/video: At Tole Park Community Preschool we utilise photos and videos for the purpose of Learning Stories, Facebook and Instagram posting, our website and parent interaction apps like StoryPark. Please sign your permission for the child to be photographed for these purposes:

- **Marketing photo/video permission:** Permission to use pictures or video of your child in our marketing material Y / N
- **Social media public:** Permission to post pictures of children to our public Facebook page, Instagram profile and website Y / N
- **Parent interaction app (Storypark):** Y / N

I understand that any photographs or video images, I as a parent or legal guardian might take at centre events, will not be used inappropriately. I will not post images on social media without parental approval from the parents of any children who appear in the image.

Parent/Guardian Signature:

Date: / /

Additional Agreed Information:

- **Policy Statement:** we have a number of policies that set out the procedures that are in place for the care and education of the children who attend our centre. 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. Our policy manual is kept in the front entrance way.
- **Policy Review:** we encourage you to support our policy review process which we post onto Storypark for your contribution. This allows you to have input into our operational practices.
- **Parent Information Book:** Please ensure you have read the information in the parent handbook as it covers such things as fee details, subsidies that are available to you, and ways in which we can help you and your child settle into the service.
- **Child's strengths, interests, and preferences:** Please tell us about your child's strengths, interests, and preferences – an "All About Me Sheet" is available in your Welcome pack.
- **Transitional School Visits:** we encourage and support our families to make these arrangements but do keep information about our local schools in the centre.
- **Storypark:** we utilise Storypark for collecting your aspiration for your child and sharing your child's learning at Tole Park Community Preschool. Please feel free to comment at any time or add stories or photos as you wish.

Parent Declaration

I declare that all the above information is true and correct to the best of my knowledge. I agree to Tole Park Community Preschool conditions of enrolment as set out in this enrolment agreement form.

Parent/Guardian Signature:

Date: / /

Parent/Guardian Signature:

Date: / /

Service Declaration

On behalf of Tole Park Community Preschool, I declare that this form has been checked and all relevant sections have been completed.

Head Teacher/Administrator:

Date: / /

Terms, Conditions, Authorisations and Permissions

Enrolment procedure: Please see Tole Park Community Preschool Fee Terms and Conditions.

Health: Verification of immunisations is required, and a copy will be taken and included with your child's enrolment file. If your child is unwell, they may be at risk of infecting other children, teachers, and adults (including expectant mothers). Therefore, we ask that you keep your child home until they are well again and advise us of your child's illness. Any child who has experienced vomiting or diarrhoea will be excluded for 48 hours from the last episode. If you are contacted to collect your child who has become unwell, we ask that this be done as quickly as possible. Any medication for your child is to be named and dated as per prescription and handed to the head teacher, this is to be documented and signed consent by you is required. In the event of an accident or emergency you authorise application of basic first aid and for the Centre to seek medical or other advice as deemed necessary and accept any expense incurred in obtaining this for your child. You understand if your child becomes ill whilst at Tole Park Community Preschool you will immediately pick them up or arrange a pickup. You understand it is your responsibility to report any health and safety concerns to Tole Park Community Preschool

Food: We have a strict NO NUT Policy. We support and encourage the guidelines of the Ministry of Health around preparation and provision of food for children. All food/meals for your child are to be provided by a parent or caregiver (lunchbox). We support waste free lunches which promote no food packaging/packaging returned home. If you want to bring food into the Centre to share for a special occasion you will first speak with a team member to gain an understanding of what is suitable and safe.

Clothing and personal items: Children are required to bring two – three, named change of clothes in their bags daily. Sunhats are compulsory in the summer months. Sunscreen should be applied by parents before attending. Our team will also apply sunscreen throughout the day. All your child's belongings, including items of clothing and footwear etc, are to be named. Please do not feel obliged to purchase labels, as a permanent marker is ample. We ask that you please keep children's toys at home.

Emergency closures: Should Tole Park Community Preschool be subject to an emergency closure you or an emergency contact specified on this enrolment form will be required to collect your child from the Centre within the time frame specified at the time of the emergency.

Policies: We have a number of policies that set out the procedures that are in place for the care and education of the children who attend Tole Park Community Preschool. Our policy documents are located at the sign in desk, and we urge you to read them. The signing of this enrolment agreement form indicates that you understand and will support our policies.

Children With Additional Specific Needs: Tole Park Community Preschool is dedicated to providing an inclusive, safe and happy learning environment for all children, families and staff who attend our centre. When an individual child has extra, specific care and learning needs, a meeting will be organised between parents and staff to determine how we can best support the child and family through these specific needs. When an action plan has been agreed upon with both parties, outside agencies may be consulted to support the child, their family and staff. Once this plan has been actioned, other additional meetings may be held. If Tole Park Community Preschool in its sole and absolute discretion, determines that we are not able to provide a safe

learning environment for the child, other children and staff, this will be discussed with the parents and alternative care arrangements may need to be made. We will give 2 weeks written notice to cease a child's enrolment.

Parent declaration and agreement:

I, _____ and _____ agree to the conditions of enrolment and the policies, regulations and fees of Tole Park Community Preschool.

1. Parent/Guardian signature: _____ Date: / /

2. Parent/Guardian signature: _____ Date: / /

How did you hear about us?

We would love to know how you found out about our Preschool...please circle below

- Ponsonby Community Centre website or noticeboard
- Word of mouth
- Social Media
- Family member
- Another website (please state) _____
- Google
- Other (please state) _____

Office use/Sign to attest:

- Enrolment form completed and signed.
- Start date entered

Children's identification – Children may be enrolled into a service even if a parent/caregiver cannot provide identity documentation. It is important to ask for identity documentation and if the parents / caregiver can provide it – please then state which document(s) you sighted.

- NZ Birth certificate or Foreign Birth certificate
 - NZ Passport
 - Foreign Passport
- Please tick which ID you have sighted.

Staff Initials: _____

WINZ

NSN number applied for

Infocare entry

Immunisation certificate

Enrolment fee

Allergies / medical / health plan completed