

DUNEDOO PRESCHOOL ENROLMENT FORM 2024



Child's Full Name _____ Preferred Name _____

Child's Residential Address _____

Date of Birth _____ SEX M/F____ Place of Birth _____

Nationality _____ Aboriginal or Torres Strait Islander (Please Circle) Yes/No

Religion _____ Language/s spoken at home _____

Cultural Practices _____

***A copy of your Child's Birth Certificate and Immunisation History Statement must be supplied prior to starting.**

Parent 1 / Authorised Nominee Details

Title _____ Name _____ Other Known Names _____

Residential Address _____

Postal Address _____ SEX M/F____ Date of Birth _____

Place of Birth _____ Language Spoken _____ Nationality _____

Home Ph _____ Work Ph _____ Mobile _____

Email _____ Occupation _____

Employer _____ Work Status FT / PT / Casual _____

Religion _____ Aboriginal or Torres Strait Islander (Please Circle) Yes / No

Parent 2 / Authorised Nominee Details

Title _____ Name _____ Other Known Names _____

Residential Address _____

Postal Address _____ SEX M/F____ Date of Birth _____

Place of Birth _____ Language Spoken _____ Nationality _____

Home Ph _____ Work Ph _____ Mobile _____

Email _____ Occupation _____

Employer _____ Work Status FT / PT / Casual _____

Religion _____ Aboriginal or Torres Strait Islander (Please Circle) Yes / No

Custody Information

Is there a Court Order Parenting Order Parenting Plan? Yes No (If YES, attach a copy)

Does the child reside with both parents? YES NO

Family Household

Other people in the household? YES NO

Name	Relationship	Date of Birth
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Medical Records

Is your child immunised and up to date? **Yes / No** Immunisation History Statement provided? **Yes / No**

Medicare Number _____ Expiry date _____ Position on Card _____

Family Doctor _____ Address _____ Phone _____

Family Dentist _____ Address _____ Phone _____

Health Fund **Yes / No** Fund Name _____ Number _____

Please complete a Medical Conditions Plan for any Allergies and Medical Conditions (See Director)

Allergies (food, medication, animals, insects)? **Yes / No** Details _____

Anaphylaxis _____ **Yes / No** EpiPen or Anapen _____ **Yes / No**

Any special dietary, cultural or religious requirements? _____

Asthmatic **YES / No** If Yes, please attach Asthma Action Plan (from Doctor) Supplied **Yes / No**

Does your child have any disabilities or health problems e.g. sight, hearing, speech, behaviour? **Yes / No**

Regular Medication **Yes / No** Medication _____ How often is it required? _____

Therapy attended (e.g. OT, Speech, Early intervention) _____

Please attach any relevant reports.

Has your child suffered from any traumatic experiences? **Yes / No** _____

As we do not hold interviews with all new enrolments please note and agree with the following. Special Need positions are allocated based on the needs of the child and are as such limited. This is so that we can provide the best care for your child. You agree that you have disclosed any special needs or pathway to diagnosis for your child and you understand that if Dunedoo Preschool deem that your child falls into this category of Special Needs and you have not disclosed this information that your child's position that you have been offered at Dunedoo Preschool may be reviewed or changed: **YES / NO**

Bus Children

Bus children must be signed **IN** and **OUT** by an Educator. Please indicate which bus your child will be Travelling on (even for future purposes). **Please note** that when your child uses a bus service they are not in our care until they are on the premises as per arrival and departure times. **Bus Policy** attached.

Travel by Bus YES NO (Boomley, Tucklan, Uarbry, Digilah, Leadville, Mendooran, Narangari)

Nominated Bus _____ Travelling am / pm (please circle)

Whilst enrolled at Dunedoo Preschool I _____ give Dunedoo Preschool Educators
Parent/Authorised Nominee

Authority to sign _____ IN and OUT of the Attendance Book when travelling to
Child's name
and/or from preschool by bus.

Yes / No I have read the **Bus Policy** (attached,) and agree to its guidelines

Signature Parent 1 _____ Signature Parent 2 _____

Kindergarten

Nominated Infants School your child will be attending? Dunedoo Central School / St Michael's / Other

School _____ Commencement Year _____

Declaration

In the event of an emergency, illness or accident concerning my child, I give consent for Dunedoo Preschool to seek and proceed;

- Medical treatment for my child from a registered medical practitioner, dentist, hospital or ambulance service; and
- Transportation of my child by an ambulance service
- I agree to take responsibility for any fees resulting from such treatment

Child's Name _____

Parent 1 Name (print) _____ Signature _____ Date _____

Parent 1 Name (print) _____ Signature _____ Date _____

Permission for Excursions and Emergency Evacuation

My child is authorised to be taken on routine excursions or outings away from Preschool. These outings will be within walking distance of the service and will not involve transportation. For non-routine excursions, for example, where private and public transport may be used), separate permission will be sought. **Yes / No**

My child is authorised to be relocated in the event of an emergency evacuation. **Yes / No**

Signature Parent 1 _____ Signature Parent 2 _____

Emergency Contacts / Authorised Nominees to Collect Child (other than parents), Consent to Medical Treatment and/or Administration of Medication, and Approval for Educator to take Child out of the Service.

1. Name _____ Address _____

Workplace _____

Ph. (H) _____ Ph.(W) _____ (M) _____

Relationship to child _____ Name known to child _____

Emergency Contact YES NO Authorised to Collect YES NO
 Authorised to consent to Medical Treatment/Administration of Medication YES NO
 Authorised to give approval for an educator to take the child out of the service YES NO

2. Name _____ Address _____

Ph. (H) _____ Ph.(W) _____ (M) _____

Workplace _____

Relationship to child _____ Name known to child _____

Emergency Contact YES NO Authorised to Collect YES NO
 Authorised to consent to Medical Treatment/Administration of Medication YES NO
 Authorised to give approval for an educator to take the child out of the service YES NO

3. Name _____ Address _____

Workplace _____

Ph. (H) _____ Ph.(W) _____ (M) _____

Relationship to child _____ Name known to child _____

Emergency Contact YES NO Authorised to Collect YES NO
 Authorised to consent to Medical Treatment/Administration of Medication YES NO
 Authorised to give approval for an educator to take the child out of the service YES NO

Comments

DUNEDOO PRESCHOOL ENROLMENT AGREEMENT

I, _____ agree to the following conditions of enrolment and contents
Parent/Authorised Nominee

from the Information Handbook by completing the agreements below.

Agreement		Parent Initials
Fee Payment	I agree to pay the required fees regularly, with the balance of my account finalised before the end of each term. I understand that any expenses associated with the collection of outstanding fees by a debt collection agency will be the responsibility of the account holder. Payments will be made – <i>Please circle</i> TERM / FORTNIGHTLY / WEEKLY	
Collection of Child	I will notify the preschool by phone or in writing should I wish my child be collected by any other person than those stated on the Authorisation to Collect Form.	
Publicity	I agree to have my child’s photograph, name and home town used in publicity for Dunedoo Preschool Kindergarten Inc. eg website and preschool publications.	
Photographing	I agree for my child to be photographed by other parents or visitors to the centre.	
	I give permission for my child to be photographed for the following reasons (you may cross out any). Educational/Programming Excursions Community Events	
Health Services	I agree for my child to be referred to a Speech Pathologist, Occupational Therapist and relevant health professionals as needed. (Parents will be consulted before proceeding with an assessment).	
School Information	I agree for Dunedoo Preschool to transfer information and documentation about my child to their nominated School/Health Professionals and//or relevant agency to support transition.	
Sunscreen	I agree for sunscreen and hat to be provided by Dunedoo Preschool.	
Bus Travel	I will Notify Dunedoo Preschool of my child’s travel arrangements and complete the appropriate permission note (per Enrolment Form). I will notify preschool if my child is NOT arriving and/or departing by bus on a given day.	
Observations	I agree to have students from University/TAFE observe my child as part of their studies.	
Preschool Activities	My child is authorised to participate in preschool cooking experiences.	
	My child may accept food supplied by parents such as birthday cakes and/or fruit.	
Nut and Chocolate Free Policy	I acknowledge and support the Nut Free and Chocolate Free Policy of Dunedoo Preschool.	

Please tick if you are eligible for any of the following categories:

- Child 4 years of age on or before 31 July 2024 Aboriginal and/or Torres Strait Islander
 Holder of a Health Care Card Number _____ Expiry _____
 Centrepay-Centrelink payment option

Final Declaration

I understand and accept the Enrolment Agreement, Regulations and requirements pertaining to my child’s Enrolment Form including the Information Handbook and Policies and Procedures of the service.

I declare the information given is accurate and agree to notify the Preschool of any changes to the above information.

Parent 1 Name (print) _____ **Parent 2 Name(print)** _____

Signature _____ Signature _____

Date _____ Date _____



Dunedoo Preschool Kindergarten Inc.

CONSENT TO USE AND DISCLOSURE OF CHILD'S PERSONAL INFORMATION

(NB: Each parent or legal guardian must sign and return a copy of this form)

I understand that Dunedoo Preschool will collect my child or legal ward's (as identified below)

_____ personal information.

Child's Name

Personal Information (including information or an opinion) may include information that I provide (or someone provides on my behalf) as part of my Child's enrolment application or as part of an application for funding for my Child or otherwise in connection with the Child's attendance at the Service, including the Child's name, date of birth, and sensitive information such as information relating to the Child's health including any disability (this may include medical records and reports) (**Personal information**).

I authorise the Service to disclose my Child's Personal Information to the New South Wales Department of Education and Communities (**Department**). I understand that the Department will only use or disclose such Personal Information relating to the Child as permitted under applicable privacy laws including the *Privacy and Personal Information Protection Act 1998* (NSW). In limited circumstances this may include disclosure to other Australian government agencies, including the Commonwealth and to those located in States and Territories outside New South Wales.

The Department may use my Child's Personal Information for any purpose relating to the exercise of its government functions including for, but not limited to, the assessment and potential provision of support or funding to my child or Service including for any teachers or caregivers in connection with the Service.

If you do not agree to your Child's Personal Information being provided to the Department then this could impact the funding allocation made available to the Service.

Under law, you may have a right of access to, and correction of, such Personal Information. Please contact the Service or the Department in such circumstances.

I consent to the collection, use and disclosure of my Child's Personal Information in the manner outlined in this form.

DETAILS OF CHILD	
PRINT FULL NAME OF CHILD	
DATE OF BIRTH	

DETAILS OF PARENT / LEGAL GUARDIAN	
PRINT FULL NAME OF PARENT/LEGAL GUARDIAN	
RELATIONSHIP TO CHILD (e.g mother, father, guardian)	

SIGNATURE OF PARENT/GUARDIAN

DATE

BUS POLICY (Please complete if travelling by bus)

Introduction

Dunedoo Preschool recognises the importance of bus travel for some families' convenience and has used the bus service for many years. The provision and accessibility of bus services directly contributes to preschool enrolments. The bus route operators collect and deliver preschool children as a good will gesture and strive to provide safe, secure and comfortable travel to and from the preschool. Dunedoo Preschool and bus operators ensure parents/caregivers are aware of policy and authorisation.

Goals

Dunedoo Preschool will:

- Ensure all parents/caregivers with children travelling on a bus route have viewed and understand the bus policy
- Ensure all parents/caregivers with children travelling on a bus service have signed the bus authorisation located on the enrolment form
- Ensure all parents/caregivers with children travelling on a bus service have nominated the name of the bus route
- Ensure all staff members are aware of which children use the bus service and store information in a known, accessible place and includes; name of bus route, the usual driver's name and mobile no., the child's usual day/s of travel
- Ensure no child will travel on a bus service without completed authorisation
- Ensure that parents/caregivers acknowledge that when children use a bus service they are not in preschool care until they are on the premises as per arrival and departure times.

Dunedoo Preschool will not:

- Organise children to use a bus service
- Take any responsibility for children travelling to and from preschool until they are on the preschool premises

Strategies

Staff will:

- Meet children travelling on a bus service at the door of the bus and safely transfer them into the preschool gate
- Transfer children safely from the preschool to the door of the bus service
- Sign children "in" and "out" – attendance book
- Ensure that all children will return home on the same bus in the afternoon unless otherwise instructed by parents/caregivers
- Be aware of any changes to travel plans and document them accordingly.

Parents/caregivers will:

- Make initial contact with the bus service to organise approval to collect and deliver child, and ensure authorisation is completed and returned to preschool before the child travels on the bus service
- Ensure staff are notified when the bus service will begin
- Understand that children who come to preschool on a bus automatically go home on the bus unless staff are notified by a parent/caregiver
- Be waiting to collect the child off the bus. If the parent is not there the child will remain on the bus and preschool will be notified by the bus service. If this occurs more than once the bus service or preschool may refuse to continue service for this child
- View and understand Dunedoo Preschool Bus Policy
- Ensure any change of travel plans are communicated to the preschool staff in business hours e.g if your child has arrived on the bus, however is not going home on the bus you must ring and advise the preschool and bus service. If you have dropped your child off, however they are returning home on the bus you must tell a staff member and write in "sign-in" book, also advise bus service.

Please Sign & Date

I have read the **Bus Policy** and agree to its guidelines

Parent Caregiver Name: _____

Parent/Caregiver Signature: _____ **Date:** _____



Dunedoo Preschool Kindergarten Inc.

Fee Policy Agreement

1. I agree that the fees for my child/children _____ will be paid by the due date.
2. If such fees are not kept up to date, I agree that I will be charged a late fee of \$50 per term until outstanding fees are recovered from me.
3. I agree that the Executive Committee may terminate my child/children's placement if fees are not kept up to date.
4. I agree that if I default in making payment and recovery/legal action is undertaken, I will be responsible for all expenses in relation to the collection of the outstanding amount including, but not limited to, all charges and fees, legal costs on an indemnity basis, and disbursements.
5. Infectious Disease Outbreak - I agree to pay fees if my child is excluded from Preschool due to non-immunisation for medical reasons – [AIR Immunisation History Form \(for a child on a catch-up schedule\)](#) as per National Immunisation Schedule, if an outbreak occurs. (Where possible a make-up day/s will be offered).
6. I have read and understand Dunedoo Preschool Kindergarten Inc Fee Policy.

Parent/Carer 1

Parent/Carer 2

Signed _____ Signed _____

Name (printed) _____ Name (printed) _____

Date _____ Date _____

OFFICE USE ONLY

Date _____

Child's Name _____ DOB _____

YES	NO	Immunisation				
YES	NO	Birth Certificate				
YES	No	Custody Details				
YES	NO	Allergy	Details			
YES	NO	Anaphylaxis	YES NO	Epi PEN	YES NO	Action Plan
YES	NO	Asthma	YES NO	Action Plan		
YES	NO	Medical Condition	YES NO	Risk Assessment		
YES	NO	Health Concerns	Details			
YES	NO	Dietary Concerns	Details			
YES	NO	Preschool Cooking				
YES	NO	Photography Restrictions				
YES	NO	Cultural Practices/Language				
YES	NO	Health Care Card Aboriginal and/or Torres Strait Islander Language other than English				

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Comments

Administration Officer Signature _____

Date _____