



Cuddles

childcare centre
Learning Through Play

Enrolment Form

Our Philosophy

Cuddles Childcare Centre promote and believe that all children are our future. We will endeavour to provide a safe, clean and caring environment and encourage family relationships and community involvement. We believe through play, children explore, experiment, enjoy and discover their physical, social, emotional and intellectual world around them. We embrace, respect and accept children from different cultures, religions and lifestyle. We believe in providing children with special needs every opportunity to reach their full potential in an integrated setting.

ENROLMENT FORM

CHILD'S DETAILS

Surname: _____ First Names: _____

Customer reference number: _____

D.O.B: _____ Sex: Male/Female (Circle)

Country of Birth: _____ Language spoken: _____

Child's Address: _____ Postcode: _____

PARENT(S)/GUARDIAN(S) NAMES/ADDRESSES/INFORMATION

Parent/Guardian (1)

Surname: _____ First Name: _____

Relationship to child: _____ CRN# _____

Address: _____ Postcode: _____

Home Telephone No: _____ Work No: _____ Ext _____

Mobile: _____ Occupation: _____

Email Address: _____

Place of Work/Study: _____

Work/Study Address: _____ Postcode: _____

Country of Birth: _____ D.O.B _____

Language spoken: _____

Parent/Guardian (2)

Surname: _____ First Name: _____

Relationship to child: _____ CRN# _____

Address: _____ Postcode: _____

Home Telephone No: _____ Work No: _____ Ext _____

Mobile: _____ Occupation: _____

Email Address: _____

Place of Work/Study: _____

Work/Study Address: _____ Postcode: _____

Country of Birth: _____ D.O.B _____

Language spoken: _____

Is there a court order in place in regards to an enrolled child? YES NO

*Please ensure both parents / guardians email addresses are available as we love to send you photos of your little one having a ball!
We will also send you upcoming events like 'Friday Fun Days' and multicultural 'Festivals'. Newsletters and statements will also be emailed.*

CENTRE VISITORS

All family members are welcome to visit the Centre at any time. Your input and involvement within the centre is appreciated.

SETTLING CHILDREN INTO CHILD CARE

We believe that, where possible, your child's settling period will be easier if you are able to follow some of the following suggestions.

We also believe that the care taken when settling your child in will assist you in leaving your child for the first time. You will have an opportunity to talk with the staff, watch them working with the children and ask questions when you are not so rushed. We understand and appreciate that children respond in different ways when separating from their parents. We will always attempt to respond to those varying needs.

The following may be helpful:

- Pre-enrolment visit(s) are encouraged.
- Parents are encouraged to spend some time with their child for the first few occasions (according to needs) and to allow staff to gradually meet the needs of the child/ren.
- Feel free to telephone during the day to check on your child's progress.
- It is recommended that the first day for the child should not be too long a period.
 - Gradually increase the time to give the child reassurance that the parent is returning for him/her.
- Staff will report to parents regarding the child's day and are happy to discuss any concerns.
- When your child becomes ready to move up into the next age group our friendly staff will discuss this transition with you and welcome your input.

PLEASE PROVIDE FOR YOUR CHILD:

- A large box of tissues at the start and quarterly thereafter
- A spare set of clothes in your child's bag each day (if toilet training more than one may be necessary)
- Sun cream at the start and whenever needed (You will be advised)
- A broad or brim style hat to keep at the Centre – which is clearly labelled
- A minimum of five (5) disposable nappies each day
- Prepared bottles of formula for the day
- A copy of your child's Immunisation Status
- A copy of your child's Birth Certificate

FEES

The following outlines the how fees can be paid. Fees must be paid on the first morning you child attends the service for the week.

- Upon enrolment, families must pay a security deposit of **one week's full fees**.
- Fees must be paid **one week in advance**.
- **Fees can be paid weekly, fortnightly or monthly in advance by EZIDEBIT ONLY.**
- Fees are payable in advance for every day that your child is enrolled at the service. This includes pupil free days, sick days and family holidays but excludes periods when the service is closed.
- Child Care Benefits (CCB) are available to all families who are Australian Residents. To find out their eligibility, families must contact the Family Assistance Office on 136150.
- Child Care Benefits can be received as:
 - A reduction of fees through the service.
 - A lump sum payment to families at the end of the financial year that the Service is used in.

Should you wish to end your child's place at the service or should management make the decision to terminate your child's place, **2 weeks written notice** is required from the ending/terminating party. **If this does not occur, 2 weeks fees will be billed to you.**

Overdue Fees

Any family who is one or more weeks late with their fees will receive a **Friendly Fee Reminder**.

Families can make appointments to speak with the approved provider or nominated supervisor regarding payments if there is a need to do so. Continually not paying fees will put your child/ren's place/s in the Service in jeopardy.

Fees of **\$2.00 a day** will apply to any overdue fees.

Signature: _____ **Print:** _____ **Date:** _____

Cuddles Refund Policy

Cuddle Childcare Centre reserves the right to not issue cash or direct refunds as parents are required, as per the enrolment form to advise the centre IN WRITING of their intention to leave two weeks prior to the child's last day of attendance.

If the child does NOT attend for the last two weeks full fees will be charged to the parent account as per DEEWR requirements.

Statements shall be issued on a weekly basis to all parents by email so please see your Centre Manager if you require further assistance.

If you have credit on your account it is your responsibility to come to an arrangement with the manager to reduce your ezidebit payment or alter the frequency.

It is the parent's responsibility to remain two weeks in advance with their fees and be aware of their account and ezidebit transactions.

Refunds will take up to 4 weeks to process.

Thank you for your assistance with this matter.

Cuddles Childcare Centre

Are you eligible?

Before you attend our centre it is advisable that you contact Centrelink to apply or see if you are eligible for the below. It can assist in reducing your fees greatly!

- **GCB** – Grandparents benefit. For grandparents that care for their grandchildren where Centrelink pays the parent portion of fees.
- **60 HOURS CCB** – For parents who work / travel / study for long hours will increase their Centrelink portion therefore reducing the parent portion.
- **JET** – For parents that are studying or seeking work. This reduces parent fees to make it affordable from \$1.20 a day. Great for students etc.
- **AMES** – Apply at your TAFE. Suitable for non permanent residents.

Priority of Access:

1st Priority: A child at risk of serious abuse or neglect.

2nd Priority: A child of a single parent who satisfies, or parents who both satisfy the work/training/study test under section 14 of the Family Assistance Act.

3rd Priority: Any other child.

(To Confirm Priority of access, please circle)

ADDITIONAL PERSONS TO BE CONTACTED IN CASE OF AN EMERGENCY. AUTHORISED TO TAKE THE CHILD FROM THE CENTRE'S PREMISES. PERSONS MUST BE 18YRS AND OVER, IN GOOD HEALTH, EASILY CONTACTABLE, WITHIN CLOSE PROXIMITY OF THE CENTRE AND CAPABLE OF DEALING WITH EMERGENCIES. ID WILL BE REQUIRED

EMERGENCY CONTACT (1)

AUTHORISED TO TAKE CHILD FROM PREMISES (Other than the Child's parents/guardians).

Surname: _____ First names: _____

Address: _____ Postcodes: _____

Home Phone: _____ Work Ph: _____ Mobile: _____

Work or Study Address: _____ Postcodes: _____

Relationship to child: _____

EMERGENCY CONTACT (2)

AUTHORISED TO TAKE CHILD FROM PREMISES (Other than the Child's parents/guardians).

Surname: _____ First names: _____

Address: _____ Postcodes: _____

Home Phone: _____ Work Ph: _____ Mobile: _____

Work or Study Address: _____ Postcodes: _____

Relationship to child: _____

WHO WILL DROP YOUR CHILD TO THE CENTRE?

Surname: _____ First Names: _____

Address: _____ Postcode: _____

WHO WILL COLLECT YOUR CHILD FROM THE CENTRE?

Surname: _____ First Names: _____

Address: _____ Postcode: _____

Date Care to Commence: _____

Days/Times	Monday	Tuesday	Wednesday	Thursday	Friday
DROP OFF					
COLLECTION					

CUSTODY OF CHILD/REN

Have any orders been made by any court regarding your child/ren? YES / NO (circle)
If NO, are there any disputes concerning custody of the child/ren?
Please provide details:

If YES, please provide the following:
Details of Guardianship and Custody, and terms of any specific Custody or Access provision (if applicable)

Enrolling Parents initials: _____

Please attach copies of relevant Court forms, documentation.

FAMILY DOCTOR'S NAME

Dr Name/Hospital: _____

Address: _____ Postcode: _____

Telephone Number/s: _____

Medicare No: _____

Private Insurance No: _____

Please ensure your Doctor is advised that he/she attends Cuddles and may be consulted, and has your permission to treat the child.

Please provide copy of your child's immunisation status:

Received: Yes / No

Please provide a copy of your child's birth certificate or extract:

Received: Yes / No

In the event of an emergency, illness or accident (when unable to contact parents/guardian or authorised person/s). I/we consent to hospital attention being sought for the child. I/we agree to pay any expenses incurred for medical treatment and transport.

Signature of Parent/Guardian _____ Date _____

Signature of Cuddles Centre Manager or representative

_____ Date _____

**Failure to provide the information above will unfortunately result in
Non-acceptance the enrolment of your child/ren.**

PROGRAMMED ACTIVITIES

I am willing for my child/ren to participate in all activities offered at Cuddles Day Care. I agree it is my responsibility to familiarise myself with the program and to advise the Centre in writing if I do not wish my child/ren to participate in particular activities. **For all programmed excursions Permission slips will be provided before your child/ren may attend.**

Signature of Parent/Guardian: _____ Date: _____

HEAD LICE

I authorise staff at Cuddles to check my child's hair for head lice and nit (eggs).

Signature of Parent/Guardian: _____ Date: _____

SCHOOL

School Name: _____

School Days: (circle) Mon Tues Wed Thur Fri

School start time: _____ School finish time: _____

TRANSPORT TO AND FROM SCHOOL

I authorise staff at Cuddles to deliver and Collect _____ (Name) from
_____ Primary School.

Signature of Parent/Guardian: _____ Date: _____

PHOTO PERMISSION

I give permission for Cuddles staff to take photographs of my child for use in my child's scrapbook and displayed within the centre and on the cuddles website. I am aware that photos of my child may be included in group photos and in other children's scrapbooks.

Signature of Parent/Guardian: _____ Date: _____

TRANSITION PERMISSION

I give permission for Cuddles staff to Transition my Child _____ into the next age group (room) when the qualified staff member deems my child is developmentally ready and he/she is six months away from being placed with the next age group.

Signature of Parent/Guardian: _____ Date: _____

HEALTH OF THE CHILD:

Does your child require REGULAR MEDICAL ATTENTION: Yes / No (circle)

If YES, please provide details:

Does your child suffer from?

Allergies	YES /NO	Details
Hearing or speech problems		
Asthma or recurrent chest infections		
Diabetes		
Seizures or epilepsy		
Eczema		

Does your child have a disability? YES / NO

If YES, what type of disability? _____

If YES, which agency is your child registered with? _____

SPECIAL NEEDS:

Does your child have a special need (eg. Dietary requirements, religious customs, requirements ect)? YES / NO

If YES, please comment:

Any other comments:

PARENT/GUARDIANS REGISTRATION AGREEMENT

1. We have viewed the Centre and consent to the enrolment of our child.
 2. We acknowledge having received and read the Parent Handbook and understand any changes to such will be displayed in the Centre's Policies and Procedures Manual available on request from the office.
 3. We agree to comply with all Government Requirements in relation to the Centre and its service.
 4. We agree that in the event of an accident or injury to my child which requires medical care, Cuddles will attempt to contact us. In the event of an emergency were we are not contactable we authorise Cuddles to arrange an Ambulance transport our child to hospital and agree to pay any expenses incurred including Ambulance costs.
 5. We agree to pay the weekly fee on the due date as determined by Cuddles with the first 2 weeks fees payable in advance on enrolment.
 6. We are aware that it is our responsibility to maintain a current Family Assistance Office Income Assessment Notice for Child Care Benefit purposes.
 7. We understand that to have access to Child Care Benefit we need to meet all current Child Care Benefit requirements.
 8. In the event that we overlook to sign the attendance record we authorise staff at Cuddles to sign on our behalf for normal attendances, absent days and or holidays.
 9. We are aware that fourteen (14) days notice in writing is required if we should be absent during the school holiday period.
 10. We are aware that fourteen (14) days paid notice in writing of cancellation of care or reduction of days must be given in advance, otherwise full fees apply
 - We are aware that Cuddles closes for Public Holidays & weekends.
 - We are aware that fees for Public Holidays are payable if the day is a usual day of attendance and is not transferable.
 - We are aware that fees are payable for days where allowable absences are taken
 11. We understand that late fees apply if a child is collected after the 6:30pm SHARP closing time.
 12. We are aware that any failure to pay fees within 7 days may result in cancellation of care at Cuddles.
 13. Fees may be adjusted from time to time with due notice given to parents.
 14. We are aware that the child will be excluded from care at Cuddles if he/she is unwell or has contracted a contagious disease or condition. I/We understand that the child may return to Cuddles upon provision of a "Clearance Certificate" from a medical practitioner.
 15. We are aware that if the child is not immunised he/she/ will be excluded from the centre if there is an outbreak of measles. I/We understand that Cuddles will accept the child for further care after the receipt of medical programs in Cuddles.
 16. We give/do not give permission for the child to receive individual observation by students on accredited training programs at Cuddles.
 17. We give/do not give permission for the child to receive support from a bilingual worker (ECCRU).
 18. We agree to provide Cuddles with all information regarding the Health of the child.
 19. We are aware that if we fail to provide information correctly as required by Cuddles, the Centre will be able to terminate its services forthwith.
- We are aware that Cuddles May occasionally have visitors and/or volunteers, with the Centre's appropriate supervision.

We have read this agreement, and received relevant information about the service offered by this Centre.

I/We are aware that the person/s nominated here as parent/guardian are the authorised parties to enrol, cancel enrolment, pay fees, release and have Cuddles release the Child to.

We agree to abide by the conditions of use of Cuddles and this Agreement.

Parent/Guardian Print _____

Parent/Guardian Signature _____ Date _____

Witness Print Name _____

Witness Signature _____ Date _____

Signature for and on behalf of Cuddles _____ Date _____



IMPROVING OUR SERVICE TO FAMILIES

What are the three most important things you need to see, know, and / or feel from us?

1. _____
2. _____
3. _____

What did you find impressive about the centre, allowing you to make a confident decision to enrol your child with us?

Why have you chosen our centre over other alternatives?

How did you come to know of us: (Please circle)

Telephone Directory Friends Internet (Google)

Location & Signage Website Newspaper

Other: _____