

Family Enrolment & Agreement Pack



Yeronga Outside School Hours Care Family Enrolment and Agreement Package

The Committee and staff of the Yeronga Outside School Hours Care (YOSHC) would like to welcome parents, children, families and visitors to our service. Our service is sponsored and supported by Yeronga State School Parents and Citizens Association, and is an active part of the Yeronga State School community.

Outside School Hours Care is designed to provide Before, After and Holiday Care from a child's first day of school until the last day of holiday care in their final year of grade 7. We fully support working parents and work with them to make our Service a place that children enjoy attending. All children are special and they require staff that will listen, help and spend time with them supporting their physical and emotional growth.

Our Service is licensed by the State Department of Education, Training and Employment. Our Service abides by the Education and Care Services National Law and the Education and Care Services National Regulations. YOSHC is yet to be assessed under the national quality framework which was introduced nationally in January 2012. Assessments are currently being processed throughout Australia and remains an ongoing process. YOSHC endeavours to keep families informed of progress as we become informed.

We hope that you find this information package helpful and informative.

Please use this checklist below to ensure you have received and completed the relevant information.

I have access to the following information:

- Yeronga OSHC Enrolment and Agreement Pack (to be completed and returned to the Nominated Supervisor)
- Yeronga OSHC Policies and Procedures (available at YOSHC HQ or via the website: <u>www.yoshc.com</u>)

L I have discussed with the Nominated Supervisor or an Administrator my child's enrolment and attendance at the service. I am satisfied that the consultation process allowed me to express any concerns or voice any questions I had. I understand that if I have any further questions or would like to view the service whilst operating I am able to come in during service hours or book a time to further consult with the Nominated Supervisor.

I understand it is my responsibility as parent/guardian to apply for Child Care Subsidy, and the Service will not be able to apply CCS to my fees until they receive confirmation through the Child Care Subsidy System (CCSS) which is directly linked to the YOSHC computer.

□ I have read, and agree to abide by the Yeronga OSHC Policy and Procedure Manual (available for all parents at the YOSHC 'sign in' desk. Also available online through the YOSHC website: <u>www.yoshc.com</u>).

I have completed the Enrolment and Agreement Pack honestly and to the best of my knowledge. I understand I must contact the Service immediately if information on this form changes.

Parent/Guardian Name:

Signed:		Date: <mark> /</mark>	/
Service Use Only			
Date Completed Enrolment Form ret	urned://///		
CRN's received and entered	CCCS rolls started	Immunisation record received	Court Order received and staff notified if applicable
Auth to collect, medical, excursion, emergency ticked	Security Q & A entered in child notes	Child info added to arvo update sheet if needed	Family email added to address book
Interview requested re. cultural beliefs	Child added to class list if in prep, grade1 or grade2	Nationality; Language info entered	Photo permission entered
Action Plan received if child has Asthma or Allergy	Action Plan laminated & added to noticeboard	Enrolment and Administration Fee charged	Medical/allergy/asthma plan needs to be formulated
Service Representative:	Sic	ined:	

Enrolment and Agreement Form

•

YO Yeronga Outsid	SHC de School Hours Care	J				
Family surname:			School Attending:			
	<u>Children's Details</u> e write siblings details as well (if attending another hildcare centre) in this section. For Centrelink)	DOI <u>Cla</u>		<u>Sex</u>	<u>CRN = Customer Reference Number</u> This info is required to claim the Child Care Subsidy (CCS)	
1.	Childs name:	/	/	ΜF	CRN:	
1.	Preferred Name:	Class:		IVI F	Nationality:	
2.	Childs name:	/	/	ΜF	CRN:	
2.	Preferred Name:	Class:			Nationality:	
3.	Childs name:	/	/	ΜF	CRN:	
0.	Preferred Name:	Class:	_		Nationality:	
	Name:		Date	of Birth:	/ / (centrelink requirement)	
	Family / Parent CRN (Customer Reference Number):					
to)	Pelationship to Child:					
inked	Nationality: Language			lage/s Spoken:		
rdian hk is l	Home Phone:	Mobile:				
Gua l						
Parent / Guardian 1 : who centrelink is lin	Home Address:				Postcode:	
<u>Parent / Guardian 1</u> ent who centrelink is linked to)	□ Please tick if this address is also the child's residentia	laddress	s. If not	, please	specify child's residential address:	
(pai	Place of Employment:		С	occupatio	n:	
	Work address:				Postcode:	
	Work Phone:	Work email:				
	Name:		Date	of Birth:	/ / (centrelink requirement)	
	Relationship to Child:					
2	Nationality:	Langu	age/s S	poken:		
dian	Home Phone:		Mobile:			
Guar	Email:					
Parent / Guardian 2	Home Address:				Postcode:	
ä	Place of Employment:		С	occupatio	n:	
	Work address:				Postcode:	
	Work Phone: Work email:					

Our program is enhanced by the special skills, abilitie program that we offer our children. Would you be inte • Joining the YOSHC Management Committee • Sharing your talent/skills/knowledge with the	rested in: ?	our families ł	nave Yes Yes	6		n com	pleme	ent the
			_					
If yes, please note your talent, skill or knowledge here								
(eg. Play a musical instrument, speak another langua How can we best communicate to you management in					aiuen, s	ew, cu	JUK EL	0)
	/ Email / Noticeboard		30 01					
		-						
Important information about custody of your child / chi								
Who has legal custody of the child / children?								
Is there a court ordered parenting order or parenting p If Yes: You must supply a copy to the centre (Please note: It is the families' responsibility to en					Yes writing	ı at all	No time	s).
Is there any other information about the children's livir	ng arrangements that v	we need to k	now	about:				
Can YOSHC take and use photographs of your child/o	children for:							
 Educational purposes, developmental measure evaluations and Quality Assurance 	urement tools, displays	, program		Yes		No		
 The YOSHC Newsletter, newspaper articles, website? 	brochures and on our	centre		Yes		No		
Does your family have any religious, cultural, spiritual can support and incorporate to best care for your child		at YOSHC		Yes		No		
If Yes, please specify or tick the box below to discuss	further with a staff me	mber:						
I would like to discuss this further								
Do you permit your child/children to celebrate:								
Birthdays				Yes		No		
Easter				Yes		No		
Christmas				Yes		No		
At times children may bring a cake or something simil friends, do you give permission for your child to share		vith their		Yes		No		
Family Doctor:		Medical con conditions			-	doctor	's lette	er of
Address:				code:				
Phone:	Family Medicare Nur	nber:						
Has your child/children ever suffered from a serious illness, injury or required hospitalisation? If yes please state child's name and specify medical details:			No					
Does your child/children have any allergies and/or as If yes please state child's name and allergy and/or as severity of condition:		triggers and			Yes			No

If your child suffers from an allergy, asthma or other medical condition you are required to provide the centre with medical management plans, anaphylaxis medical management or risk minimisation plan. Has this been provided to the centre?		Yes		No
Do you need to meet with a staff member to formulate a risk minimisation plan?		Yes		No
Does your child require staff to administer / supervise other medication (eg. Long term medication; eg.asthma)? If yes, please state child's name and specify details:		Yes		No
(by ticking yes you are authorising staff to administer specified medication to your child)				
Is a doctor's letter or additional information attached?		Yes		No
Do you authorise educators to:				
 Provide emergency medical treatment, including obtaining any medical, hospital and/or ambulance service in the case of an accident or emergency? 		Yes		No
 Apply products to my child/children's skin as necessary to maintain health and hygiene (eg. sunscreen, hand wash)? Please check with the educators on the current brands being used and notify of any allergic reaction prior to enrolment. 		Yes		No
 Liaise with health/medical professionals in relation to the care of your child? 		Yes		No
 Share information relevant to the care of your child (eg. Health, wellbeing and/or cultural requirements) amongst educators and/or support workers who are working within the school and YOSHC. 		Yes		No
Has your child received the recommended immunisations to date for their age? A copy of your child's immunisation records needs to be provided to the centre and updated at all times.		Yes		No
Please note: When a vaccine preventable disease is present or suspected at the centre, children who the centre DOES NOT have a complete record of immunisation for, may be treated as unimmunised and therefore will be excluded from the centre for the recommended period of time to protect the child and to prevent further spreading of the disease, normal booking charges will apply during times of absence.				
Does the centre have a copy of the immunisation record?	_	Yes		No
Staff to initial		165		No
Does your child have any additional needs in regards to their ability level that we should know about to provide them with the best care possible?		Nee		
If yes please state child's name and specify details:		Yes		No
For the purposes of Australian Government Childcare Census, please indicate the following they apply):	special	considera	ations (tio	ck box if
Parent with a disability or caring for someone with a disability				
Child with learning needs				
Child with communication needs				
Child with mobility needs				
Child with internersenal needs				

- □ Child with interpersonal needs
- \Box Child with other needs

□ Your child/children identify as Aboriginal or Torres Strait Islander

Authorised Nominee/s:

An authorised nominee is defined under the Education and Services National Regulation as a person who has been given permission by a parent or family member to collect the child from the education and care service.

The YOSHC Management Committee has ruled that Authorised Nominees need to be at least 16 years old to be authorised to collect a child from YOSHC (2014 MCM).

Please note: that unfamiliar authorised collectors and emergency contacts of the child/children will be required to present photographic ID such as Driver's License, 18+ card, Senior's Card or passport before picking up the child/children.

We recommend that you advise all contacts to bring along photographic ID when collecting your child.

Please note: Cancellations and changes to bookings will only be accepted from a child's parent/guardian

In accordance to the Education and Care Services National Regulation Parent/guardians must list contacts (authorised nominees) for the Education and Care service to contact *in the event that we require consent to medical treatment or administration of medication and we are unable to reach the parent or guardian of the child.*

1. Name:		Relationship to child:
Address:		Postcode:
Phone:	Mobile:	
2. Name:		Relationship to child:
Address:		Postcode:
Phone:	Mobile:	
3. Name:		Relationship to child:
Address:		Postcode:
Phone:	Mobile:	

I authorise the Authorised Nominee's specified above to:

- Collect my child/children from the service
- Be contacted in the event of an emergency where a parent/guardian cannot be reached
- Consent to medical treatment of my child and to authorise the administration of medication to my child
- Authorise an educator to take my child outside the education and care service

Parent/Guardian Name:

Signed: Date: / /

In an emergency a person who is not listed on the child's enrolment form may be required to collect a child, or a parent may request that a child leave the service alone. Permission in this instance may be granted via email or phone. If the request is made via telephone, the parent/guardian will have to answer a security question before notifying staff of the emergency persons details, staff will then fill in an 'additional authorized person' form and the form will be signed by the parent/guardian when they next visit the centre.

Can you please specify a question that we can use to identify you:

If you're stuck try: What was my first pet's name? Or What is the name of my favourite book? Answer:

Is there any further information you would like to make the service aware of:

I/We agree to notify the centre of any change to information provided in the enrolment pack.

I/We agree to pay all childcare fees incurred, including absent days and fees resulting from late collection.

I/We agree to abide by the centres fee schedule and associated booking and cancellation procedures.

I/We understand that all fees must be paid one week in advance to secure a booking. This includes the enrolment fee which must be paid for each child prior to commencement at the centre.

I/We agree to pay outstanding fees applicable together with all debt recovery expenses incurred if my/our family develops an outstanding account at the centre. This includes mercantile agent's fee, court costs and legal fees reasonably incurred by the centre.

I/We understand that in the case of a default, the parent/guardian acknowledges that any enrolment information specifically required for the purpose of debt recovery and identification of individuals in default may be forwarded to legal/collection agencies for legal recovery action.

I/We understand that in the case of a default, enrolment details may be listed on the National Default Register for a period of six (6) years and 30 days or until paid. This information may be accessed by other providers at the time of enrolment.

I/We understand that care may be refused in the case of a default.

I/We acknowledge that I/we have received a "Family Package" and agree to abide by the rules, policies and procedures of the service.

I/We understand that it is necessary to personally sign children out as required for the various care programs. If any person apart from those listed on the enrolment form is to collect and sign out my/our child/children, I/we agree to notify the centre in advance to this effect.

I/We agree to inform the centre of any absence of my child/children on or prior to the day due to attend.

I/We understand that management and/or staff **can not** enforce Family Court Orders or Domestic Violence Orders by law.

I/We agree to keep my/our child/children from attending the Program should he/she be suffering from any illness/infectious or contagious disease as per the Infectious Disease policy of the centre. I/We accept that the centre will enforce the recommended minimum exclusion periods recommended by an appropriate governing body.

I/We understand and accept that while all efforts are taken to prevent illness or injury to your child we reserve the right to seek and/or provide medical and/or emergency treatment for your child if deemed necessary by centre educators. In the event of an emergency every effort will be made to contact parents/guardians and emergency contacts. If we are unable to do this educators at the centre will contact the ambulance for transport and authorise treatment as deemed necessary by medical staff. The parents/guardians will be responsible for any costs incurred by this treatment or transportation. The parent will notify the centre in writing of any restrictions regarding medical treatment of the child.

I/We understand that for my child to receive medication whilst at the centre I must complete a medication form for the administration of any medication to my child/children. This includes prescription and over the counter medications and creams as per the Education and Care Services Regulation 2011.

I/We understand that educators may need to escort my child/children off the premises to safety if there is an emergency evacuation

I/We understand that my child/children will be transported by bus, train or will walk to and from school and excursions.

I/We understand that when travelling on a seat-belt fitted bus, my child/children will be required to wear a seat belt.

I/We agree to keep the centre updated on changes to authorised nominees. I understand that in keeping with the Education and Care Services National Regulation (S 160:3) my child/children will not be released into the care of a person who has not been listed on this form as a parent or authorised nominee. I understand that the service will take reasonable steps to prevent a non-custodial parent (as determined by a current court order or parenting order) from having access to, or collecting, any child listed on the order.

I/We will ensure that all authorised nominees are advised of their responsibilities to ensure they collect my child by the service closing time. Failure to do so will result in a late collection fee being applied.

I/We understand that the service must comply with the Priority of Access for CCS purposes. I acknowledge that where a child with a higher priority requires care that I may be contacted to change or reduce my days. I understand that I will be provided with 14 days' notice if this occurs.

- <u>First Priority</u> A child at risk of serious abuse or neglect.
- <u>Second Priority</u> A child of a single parent who satisfies, or of parents who both satisfy the work/training/study test under Section 14 of the Family Assistance Act
- <u>Third Priority</u> Any other child

I/We understand that my child's lunch box will be kept within their bag in a shaded area whilst on Holiday Care. When going on excursion children will carry their bags with lunchboxes contained within. If families require special care for lunches, excursion restraints should be taken into consideration.

I/We understand that the information within this Family Enrolment Package will be used in keeping with the Information Handling Policy and the other Policies and Procedures of the service from time to time.

I/We understand that the service may screen G and/or PG rated movies, DVD's, computer games and music whilst my child is in attendance at the service.

I/We agree to abide by the YOSHC Sun Safety Policy. This includes wide brimmed hats are to be worn by all children at the service when outside, suitable sunscreen is applied throughout the day, there will be limited outdoor activities planned between 10am and 2pm; sun smart rashies are to be worn on swimming days. Please read the full policy via the Policies and Procedures.

I/We authorise educators of the centre to seek and/or provide medical and/or emergency treatment for my child **including the administration of life saving medication (eg. Epipen or Ventolin)** should this be considered necessary and agree to meet all costs incurred by this treatment and or transport.

By signing this document I acknowledge that I have read, understood and agree to abide by the information contained in this enrolment and agreement pack.

Name:	
Signature:	Date:/
Name: <mark></mark>	
Signature:	Date:/



Care Requirements Form

Family Name: _____

_____ Date of Care to Begin:...../...../...../...../

Before and After School Care:

□ We require care on a **<u>permanent</u>** basis for the following days (Please tick appropriate days):

Child 1:_____

	Monday	Tuesday	Wednesday	Thursday	Friday
Before School Care					
After School Care					

Child 2:_____

	Monday	Tuesday	Wednesday	Thursday	Friday
Before School Care					
After School Care					

Child 3:_____

	Monday	Tuesday	Wednesday	Thursday	Friday
Before School Care					
After School Care					

□ We will be attending Yeronga OSHC on a <u>casual</u> basis and will notify YOSHC when we need care.

Holiday Care:

- □ We will be attending YOSHC for Holiday Care only.
- □ We will/may be attending YOSHC for Holiday Care as well as Before and After School Care

Yeronga OSHC

Contact Details:	Hours:	
Nominated Supervisor: Tanya Harris Educational Leader: Lucy Reid Financial Administrator: Christina Hall	Before School Care	7.00am – 8.45am
Tel: 07 3426 0361 Fax: 07 3426 0362	After School Care	3.00pm – 6.00pm
Mail: 122 Park Road, Yeronga Q 4104	Holiday Care & Pupil Free Days	7.00am – 6.00pm
Email: <u>yoshc@live.com.au</u> Website: <u>www.yoshc.com</u>		

Fees and Charges*

(*Please note these fees are subject to minor change with the review of the budget at the end of the year)

<u>Session</u> Before School Care Permanent Before School Care Casual	<u>Time</u> 7.00 am – 8.45 am	<u>Cost</u> \$14.00 \$16.00
After School Care Permanent After School Care Casual	3.00 pm – 6.00 pm	\$21.50 \$23.50
Holiday Care and Pupil Free Day Full Day (Additional fees for excursion & incursion days)	7.00 am – 6 00 pm	\$51.00

Enrolment Fee (due on enrolment): \$15 per child Administration Fee (due annually): \$30 per family

No Notification Fee (YOSHC must be notified when a child will not be attending a session): \$5 per session

Late Fee (Families must collect their children before 6pm): \$15/15minutes or part thereof

See Policies and Procedures for booking cancellation timeframes.

Making Payments

Statements are emailed out fortnightly to each active family. Payments can be made via cheque, eftpos, credit card, cash (at the centre) or directly into the YOSHC bank account:

Account Name: Yeronga Out of School Hours Care

BSB: 084 126 Account Number: 02 993 0279

For payments other than direct deposit families need to follow the procedure displayed at the payments desk. The step by step instructions on how to make your payment are on the wall behind the desk. If you need assistance please don't hesitate to ask.

YOSHC does not carry change so if you're paying cash please bring in the correct amount.

If you'd like to see if you're eligible for the Child Care Subsidy (CCS) please contact the Department of Human Services (136150) for a Customer Reference Number for yourself and your child. Once you've received these numbers pass them onto a Nominated Supervisor at YOSHC and we'll enter them into the Child Care Subsidy System (CCSS). It can take a few days for your CCS amount to come through so please be patient ©

CCSS Approval ID for YOSHC (for centrelink purposes): CCMS_1_61P_64

If you have any enquiries about your account please see the Coordinator on duty.

Quick Pointers for Families

Before and After School Care

 $\overset{\text{W}}{\bigcup}$ Hat (no hat = no outside play)

Holiday Care

 $\overset{\text{W}}{\bigcup}$ Hat (no hat = no outside play)

Binclosed shoes

Drink bottle for water

Towel, togs and sun smart shirt if swimming

Sunscreen, if allergic to the brand supplied

Use of food for lunch (we provide breakfast, morning and afternoon tea)

 $\sum_{i=1}^{N}$ Please ensure there are no nuts in your child's lunch, for the safety of our anaphylactic children.

Clothes suitable for craft and other activities

Change of clothes

Health & Community Service Dept Contact Information

Department of Human Services	132 468
Department of Human Services	http://www.humanservices.gov.au/
Community Child Health Service	http://www.health.qld.gov.au/cchs/about.asp
Community Health Service	http://www.health.qld.gov.au/services/default.asp
	07 3234 0111
Queensland Health	www.health.qld.gov.au
	Counselling and Support
Domestic Violence Telephone Service	Womensline: 1800 811 811
	Mensline: 1800 600 636
	13 11 14
Lifeline	www.lifeline.org.au
Poisons Information Centre	13 11 26
	07 3365 7290
Positive Parenting Program (PPP)	http://www1.triplep.net/
	1300 364 277
Relationships Australia	http://www.raq.org.au/
	1800 177 577
Women's Infolink	http://www.communities.qld.gov.au/women/about- us/womens-infolink

YOSHC Staff and Centre Details

Your child's care giver details as at the date of enrolment are as follows:





This service is licensed by the Department of Education, Training and Employment, with specifications detailed in the Education and Care Services National Law and the Education and Care Services National Regulation 2011. The service complies with the conditions set out in the National Law and Regulation, including, for example, the requirements relating to activities, experiences and programs, staff members' qualifications, numbers of staff members and children.

You are encouraged to ask the Nominated Supervisor for information relating to the following:

- Your child's enrolment at this service including the activities and experiences provided by the service
- The service philosophy about learning and child development outcomes and how it is intended the outcomes will be achieved; and
- The goals about knowledge and skills to be developed through activities and experiences.

Please note: Notices stating the current information about groups and staffing in the centre is displayed at the centre.

Yours sincerely,

Yeronga State School P and C Association, Outside School Hours Care

