



Gold Coast Christian College

Kindergarten Insert for Enrolment

To be completed along with GCCC Application for Enrolment

NAME:		DATE OF BIRTH:		
PART A: SIBLING DETAILS				
Name of any siblings currently attending other Care facilities (Long Day Care, Family Day Care & Outside School Hours Care):		Facility:		
PART B: DAYS REQUIRED (PLEASE SELECT THE DAYS YOU REQUIRE – MINIMUM OF 3 DAYS.)				
COMPULSORY KINDY DAYS				
Monday	Tuesday	Wednesday	Thursday	Friday
PART C: SPECIAL CONSIDERATIONS (for example any cultural, religious or dietary requirements or additional needs)				
PART D: AUTHORISED PERSONS				
<p>There may be occasions when, due to illness, injury or accident and the Parent / Carer cannot be contacted. If this situation should arise, a staff member will need to contact an alternate person authorized to collect and care for your child. Personal identification will be required in order to collect your child on your behalf.</p> <p>This list can be changed throughout your child's enrolment. Any person not detailed below will not be permitted to collect your child without prior permission.</p>				
Person 1		Person 2		
First Name:		First Name:		
Surname:		Surname:		
Home phone:		Home phone:		
Mobile:		Mobile:		
Relationship to child:		Relationship to child:		
Is authorised to: <ul style="list-style-type: none"> <input type="checkbox"/> Collect my child <input type="checkbox"/> Consent to medical treatment or to authorise administration of medication <input type="checkbox"/> Authorise an educator to take the child outside the education and care service premises 		Is authorised to: <ul style="list-style-type: none"> <input type="checkbox"/> Collect my child <input type="checkbox"/> Consent to medical treatment or to authorise administration of medication <input type="checkbox"/> Authorise an educator to take the child outside the education and care service premises 		
Person 3		Person 4		
First Name:		First Name:		
Surname:		Surname:		
Home phone:		Home phone:		
Mobile:		Mobile:		
Relationship to child:		Relationship to child:		
Is authorised to: <ul style="list-style-type: none"> <input type="checkbox"/> Collect my child <input type="checkbox"/> Consent to medical treatment or to authorise administration of medication <input type="checkbox"/> Authorise an educator to take the child outside the education and care service premises 		Is authorised to: <ul style="list-style-type: none"> <input type="checkbox"/> Collect my child <input type="checkbox"/> Consent to medical treatment or to authorise administration of medication <input type="checkbox"/> Authorise an educator to take the child outside the education and care service premises 		

PART E: PERMISSION FOR STAFF TO ASSIST STUDENTS

Do you give your permission for (please mark yes or no):	YES	NO
Ambulance Transportation For transportation of my child by an ambulance service.		
Sun / Insect Protection For staff to apply sunscreen and insect repellent at the appropriate times?		
Administering of Paracetamol and or Nurofren For staff to administer one dosage of Paracetamol / Nurofren in the event the child's body temperature rises above 38°C? The staff will make contact with either the Parents / Carers or the Emergency Contact to inform them that Paracetamol is being administered and discuss at the time further actions to take in the event that the temperature does not subside within an appropriate time frame.		
Asthma I hereby give permission for my child to be administered Ventolin if he/she has an asthma attack while at Kindergarten. (Ventolin and a volumatic spacer from the College's first aid kit are available for use in the event of a child having an asthma attack at Kindergarten and being without his/her own medication.)		
Permission to Display If allergies, medical conditions or food intolerances apply, then name and photo will be displayed on awareness poster located on room walls?		
Permission for Observation For your child to be observed for staff, student or visitor purposes. Student and visitors will be from accredited training programs and will work in conjunction with your child's educator. If questioning or testing is to be carried out further permission will be required?		
Permission for Evacuations For your child to participate in regular evacuation drills under the supervision of the College staff to a safety zone?		
Excursions within school grounds For your child to go on short walking excursions within the College grounds under the supervision of staff, who will abide by Kindergarten policies and Government childcare regulations?		
Water Based Activities For your child to participate in water play activities as provided and supervised by educators?		
Please Note: Non-Immunisation <i>If your child is not immunised he / she will be excluded from the Centre until the infectious period of the disease has passed (in accordance with Government requirements).</i>		

I / We declare to be the lawful authorised person/s in relation to the child referred to in this enrolment form.

I / We hereby authorise the persons listed above to collect my child from the College Kindergarten and to sign him / her in and out as required.

Parent / Carer's Name: _____ Date: _____

Parent / Carer Signature: _____ Date: _____