

Enrolment form



Ministry of Education regulations require us to collect this information for each child at Kindergarten. Please ask the teaching team if you need help with any part of this form. Thank you.

KG TN DETAILS

Birth date
Enrolment date
Start date
Leaving date
Reason for leaving
Immunisation cert <input type="radio"/> 0-15 months <input type="radio"/>
<input type="radio"/> 0-4 years <input type="radio"/>

YOUR CHILD'S DETAILS

CHILDS DETAILS

Name your child is known by / preferred name

Given name	Surname	
Child's official given name	Child's official surname or family name	
Child's official other names / middle names (please separate names with a comma) <input type="radio"/> Male <input type="radio"/> Female		
Child's primary residential address	Post code	
Child's ethnic origin/s	Iwi your child belongs to	Language/s spoken at home
Can your child understand greetings and simple instructions in English? <input type="radio"/> Yes <input type="radio"/> No		
Does your child have learning and / or development needs? <input type="radio"/> Yes <input type="radio"/> No		
If "yes", please give details		
Name any support people or organisations that are currently working with your child, e.g. speech therapist, paediatrician, etc.		
Child's date of birth		
Copy of official identity verification documents* collected by staff <input type="radio"/> New Zealand birth certificate <input type="radio"/> Foreign birth certificate <input type="radio"/> New Zealand passport <input type="radio"/> Foreign passport	Staff initials <input type="radio"/> Other	

YOUR DETAILS

PARENTS / GUARDIANS

Name (1)	Name (2)
Address	Address
Relationship to child	Relationship to child
Day phone	Day phone
Night phone	Night phone
Mobile phone	Mobile phone
Email	Email
I / we are happy to receive newsletters and other communications by email <input type="radio"/> Yes <input type="radio"/> No	

PRIVACY STATEMENT

We are collecting personal information on this enrolment form for the purposes of providing early childhood education for your child. We will use and disclose your child's information only in accordance with the Privacy Act 1993. Under that Act you have the right to access and request correction of any personal information we hold about you or your child. Details about your child's identity will be shared with the Ministry of Education so that it can allocate a national student number for your child. This unique identifier will be used for research, statistics, funding and the measurement of educational outcomes. You can find more information about national student numbers at eli.education.govt.nz.
 * Information about acceptable identity verification documents is available online at eli.education.govt.nz.
 The Ministry recommends that all services keep a copy of the identity verification document of each child who is enrolled at the service.



SIGNED BY PARENT / GUARDIAN

DATE

Enrolment form



SCHOOL

How did you find out about our kindergarten?

Advert Another parent / family Previously enrolled child Signage Other

Which school is your child likely to attend?

MEDICAL DETAILS

Your child's safety is important to us. Please complete the medical details below to help us provide the best care for your child

Allergies

Special diet, e.g. vegan

Doctor's name

Medical centre / name

Phone

Does your child have any special health needs or medication requirements?

Yes

No

If YES – please explain

EMERGENCY CONTACTS

Please tell us who we should contact in an emergency if you are not available. It is very important that you fill in this section

- This is for medical or civil defence emergencies
- These people should not be your child's main caregivers, and if possible they should live nearby
- They may be the same people as those authorised to collect your child
- Please let these people know you have given their names as emergency contacts

Name

Phone

Relationship to child

COLLECTION

Who *can* collect your child?

Your child's safety is important to us – only the people below* will be allowed to collect your child from the kindergarten. If someone else is collecting your child, you must let the teachers know. Parents don't need to put their own name here as they are automatically authorised, unless forbidden through a court order.

* They must be over the age of 14 years

Name

Phone

Relationship to child

Who *cannot* collect your child?

Is there anyone who is NOT ALLOWED BY LAW to have access to your child? You will need to give us a copy of a legal document as proof. Please list their name(s)

Enrolment form

STATEMENT OF UNDERSTANDING

- I understand that the teachers are responsible for this child only during kindergarten sessions, and I am responsible for seeing that this child gets safely to and from kindergarten Yes No
- I understand that I will need to give written approval for any time this child has to travel for a trip or excursion Yes No
- I give permission for this child to go for walks with the staff in the area around the kindergarten. I understand that the ratio for these outings will be 1 adult to 4 children Yes No
- I give permission for this child to be photographed or videoed at the kindergarten for learning related purposes Yes No
- I give permission for any such photograph or video to be used for publicity purposes, including the association website Yes No
- I give permission for this child's name to be published in kindergarten newsletters Yes No
- I give permission for samples of this child's work to be used in displays – at the kindergarten or in the community Yes No
- I give permission for my details to be given to the kindergarten parent group for fundraising purposes Yes No
- I give permission for this child's name and date of birth to be given to the school he / she will be attending Yes No
- I give permission for the staff to apply non-prescription, basic first aid that is not swallowed – such as arnica cream, antiseptic liquid, insect bite treatment etc. – and sunscreen products to this child Yes No
- I give permission for the staff to change this child's soiled or wet clothing when necessary Yes No
- I accept responsibility for costs of any medical treatment required by this child in an emergency situation Yes No
- I understand this child will be taken to an alternative location during an emergency. This might be a local civil defence centre or other safe place Yes No
- I have read the sleeping policy and seen the sleeping / rest facilities Yes No
- I understand that my child's portfolio / profile document will be accessible to my child and my family and I confirm that I will respect the confidentiality of other children's documents Yes No
- I give permission for my child to use ICT, including the internet, as part of the learning programme Yes No
- I have read the notice on "Using ICT at Kindergarten". I confirm that I will follow these requirements Yes No



SIGNED BY PARENT / GUARDIAN

DATE

FEE CONTRACT

Please see Hutt City Kindergartens fee policy for further details

Families who are not using all or any of their 20 hours ECE at kindergarten will be asked to pay a fee for each hour that is not attested for the Government's 20 hours ECE.

I have read the kindergarten's fee policy and agree to pay any fees resulting from my child's enrolment at kindergarten as per this policy.

I elect to pay any required fees on the following basis Automatic payment Internet banking Cheque/cash

Whanau payments

Whanau payments support our high quality learning programme. Whanau payments are based on a donation of 50 cents per hour (maximum of \$10.00 per week). Notices are sent at the beginning of each term. Any donation received makes a big difference.



SIGNED BY PARENT / GUARDIAN

DATE

OFFICE ONLY

For completion by kindergarten administration

Copy of any required legal documents placed on file? Yes / No / Not applicable Date

Contact and emergency details checked on commencement? Yes / No Date

On behalf of this kindergarten, I declare that this form has been checked and all relevant sections have been completed.



NAME

SIGNATURE

DATE

For completion by kindergarten administrator

Enrolment form

AGREEMENT

DATE OF ENROLMENT DATE OF ENTRY DATE OF EXIT

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

Days enrolled (please circle)	Monday	Tuesday	Wednesday	Thursday	Friday		
Times enrolled						Total hours for the week	
For 20 hours ECE, please fill out the boxes below with the hours attested, e.g. 4 hours							
20 hours ECE at this kindergarten						Total hours at kindergarten	
20 hours ECE at another service						Total hours at other service	
						Weekly total 20 hours ECE	

Statutory holidays / term breaks

This enrolment agreement is exclusive of school term breaks. Please ask your teaching team for a copy of our term dates.

Any changes to this agreement must be confirmed by the parent / guardian. The "Confirmation of Enrolment and 20 Hours ECE Attestation Form" must be printed from InfoCare, signed by the parent / guardian and kept with this Enrolment Form.



SIGNED BY PARENT / GUARDIAN

DATE

20 HOURS ECE ATTESTATION

Is your child receiving 20 hours ECE for up to six hours per day, 20 hours per week at this kindergarten? Yes No

Is your child receiving 20 hours ECE at any other service/s? 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 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 the kindergarten providing relevant information to the Ministry of Education, and to other early childhood services your child is enrolled at, about the information contained in this section



SIGNED BY PARENT / GUARDIAN

DATE

DUAL ENROLMENT DECLARATION (Please circle)

I hereby declare that my child is / is not enrolled at another early childhood service at the same time he / she is enrolled at this kindergarten.



SIGNED BY PARENT / GUARDIAN

DATE

PARENT DECLARATION

I declare that all of the above information is true and correct to the best of my knowledge.



SIGNED BY PARENT / GUARDIAN

DATE