

Toddler Community Enrolment Form

Child's Surname Child's given name(s).....

Child's DOB / / Child's age Child's Gender (M / F)

Child's Usual Home (Street) Address

Suburb Post Code.....

Language(s) spoken at home.....

Ethnic, Cultural and Religious background.....

Where did you hear about CMS?

Parent / Guardian Information

Mother / Parent 1 / Guardian 1

Surname Given Name(s).....

Street Address

Suburb Post Code.....

Home Phone..... Mobile Phone

Email Address

Occupation Employer.....

Postal Address

Postal Suburb Work Phone

Does the child live with the mother / parent 1? Yes No

Father / Parent 2 / Guardian 2

Surname Given Name(s).....

Street Address

Suburb Post Code.....

Home Phone..... Mobile Phone

Email Address

Occupation Employer.....

Postal Address

Postal Suburb Work Phone

Does the child live with the father / parent 2? Yes No

Medical and Health Information

Medical conditions

Has the child been diagnosed with any of the following conditions?

Anaphylaxis Yes No Allergen(s).....

Asthma Yes No Allergen(s).....

Epilepsy Yes No Trigger(s)

Diabetes Yes No

Allergies or sensitivities Yes No Allergen(s).....

Please refer to our *Anaphylaxis Policy, Asthma Policy, Epilepsy Policy, Diabetes Policy and Food Policy* for further information.

Any other health problems?

Immunisation

Has the child been immunised? Yes No

If No, please state the reasons

If Yes, please attach a copy of the child's immunisation record.

Administration

Marketing

We may use photographs of our school and students in our marketing material (such as prospectuses, brochures, print advertising, websites, etc.) and we need to get your permission to use your child's photograph, name and suburb/town in such material.

I hereby consent to my child's photograph, name and suburb/town being used for school promotional material: Yes No

I hereby consent to my child's photograph, with NO identifying info, being used for school promotional material: Yes No

Parent Directory

I hereby consent to my child's name and the name(s) of his/her parent(s), their address, telephone numbers and email addresses to be entered into the Parent Directory: Yes No

Newsletter

Our Newsletters can be sent to you via email rather than hard copy – this is more cost effective for the school and kinder to the environment. Please indicate whether you are happy to receive our Newsletters via email: Yes No

Email address for newsletters.....

Declaration and Signatures

I/We, person(s) with lawful authority for the child referred to in this enrolment form:

- Declare that the information in the enrolment form is true and correct and undertake to immediately inform the children's service in the event of any change to this information.
- Have read, understand and agree to follow the fee payment structure and school policies/procedures.

Signed Date / /