

Cool Kids Warkworth

Enrolment Contract - Holiday Programme (4 Weeks)

Please complete all sections and **PRINT** clearly.

1 CHILD DETAILS

FAMILY NAME	<input type="text"/>	Home phone	<input type="text"/>		
Child's Name (1)	<input type="text"/>	Age	<input type="text"/>	Boy	<input type="text"/>
				Girl	<input type="text"/>
Residential Address	<input type="text"/>				
School Attended	<input type="text"/>	Year Level	<input type="text"/>	Ethnicity	<input type="text"/>

2 PLEASE SPECIFY ANY MEDICAL CONDITIONS, OR ALLERGIES YOUR CHILD HAS, INCLUDING ADHD, ANY SPECIAL DIETARY NEEDS AND ANY SPECIAL NEEDS OR CIRCUMSTANCES ABOUT WHICH WE SHOULD BE MADE AWARE.

If your child requires medication administered while attending this programme, you are required to complete a separate MEDICAL CONSENT FORM. Please ask staff on site.

Family Doctor	<input type="text"/>	Phone	<input type="text"/>
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3 PARENT / CAREGIVER 1

Name	<input type="text"/>			
Relationship to child	<input type="text"/>	Home phone	<input type="text"/>	
Email	<input type="text"/>	Business phone	<input type="text"/>	
Residential/Postal Address (if different from child's above)	<input type="text"/>	Mobile	<input type="text"/>	

4 PARENT / CAREGIVER 2

Name	<input type="text"/>			
Relationship to child	<input type="text"/>	Home phone	<input type="text"/>	
Email	<input type="text"/>	Business phone	<input type="text"/>	
Residential/Postal Address (if different from child's above)	<input type="text"/>	Mobile	<input type="text"/>	

5 ALTERNATIVE EMERGENCY CONTACT – This must be provided

Name	<input type="text"/>		
Relationship to child	<input type="text"/>	Phone	<input type="text"/>

6 AUTHORISED ACCESS - Any changes to this section must be notified in writing to Warkworth School.

Is anyone forbidden by law to have access to the child who is enrolled on this contract? ☐ NO ☐ YES

If YES, please provide a copy of the legal document that supports this claim. Supplied on [date]

7 WHO, OTHER THAN THE PERSON SIGNING THIS FORM, IS AUTHORISED TO PICK UP THIS CHILD FROM THIS PROGRAMME?

Name (1)

Home phone (1)

Relationship to child (1)

Mobile (1)

Name (2)

Home phone (2)

Relationship to child (2)

Mobile (2)

8 ATTENDANCE - Please indicate the days and hours your child will be attending.

Expected Start Date:

		Monday		Tuesday		Wednesday		Thursday		Friday	
Week 1	Holiday Programme										
	Before/After Care	Before	After	Before	After	Before	After	Before	After	Before	After
Week 2	Holiday Programme										
	Before/After Care	Before	After	Before	After	Before	After	Before	After	Before	After
Week 3	Holiday Programme										
	Before/After Care	Before	After	Before	After	Before	After	Before	After	Before	After
Week 4	Holiday Programme					N/A		N/A		N/A	
	Before/After Care	Before	After	Before	After	Before	After	Before	After	Before	After

Please Note: If you have care requirements for times other than the above, please contact the Supervisor directly (027 931 1311) to discuss as flexibility of hours is possible on non-trip days.

DISCLAIMER

- I have read the parent information and agree to abide by the Terms and Conditions of 'Cool Kids' Warkworth OSCAR programme. Any changes to the Terms and Conditions will be notified to me.
- I acknowledge that Cool Kids Warkworth management or staff will not be liable for any loss or damage arising (by way of accident, injury, theft or otherwise) out of attendance at the Cool Kids.
- I accept responsibility for any expenses incurred in obtaining treatment for my child in an emergency situation.
- I give permission for my child to be taken to an alternative location (eg civil defence centre) in the event of an emergency situation and for my child to be transported in accordance with the Transport Policy.
- I agree to pay fees as stipulated in the Fees Policy.

PRIVACY ACT

Information collected will be used for the purpose of establishing and maintaining accurate records held by Cool Kids Warkworth. Children's individual files will be available for perusal by parents / caregivers with authorised access. (All personal information will be destroyed at the completion of your child's time in the programme.)

Name

Signature

Date

Cool Kids

Parent Information – Holiday Programme

Cool Kids Before & After Care Programme has been established to provide quality care for children attending our holiday programme.

It operates from the Senior Area Hall between the hours of 7:30 – 9.00am and 3:00 - 6:00pm, Monday to Friday at a cost of \$7.50 per hour.

The completion of an enrolment form is necessary before a child can enter the programme.

It is Cool Kids intention to provide a professional service, which will give your child a safe, secure environment and enjoyable care experience.

Afternoon Tea

Children enrolled in After Care will receive a light snack and drink for afternoon tea. This may include seasonal fruit, sandwiches, biscuits and occasionally scones and baking, made as part of the programme.

Please advise if there is any food your child is not allowed.

Collecting Your Child

When arriving to collect your child please sign them out on the Attendance Sheet with the exact time, and advise the Programme Supervisor you are taking your child.

Complaints

The programme has a complaints procedure. If you have any problems, please approach the Supervisor who will be happy to assist you with your concerns.

Supervision Ratios

The programme will operate on a ratio of 1:10, as recommended by MSD. There will be an appropriate number of staff on duty, with a minimum of 2 staff on at all times.

Subsidy

Cool Kids is a MSD approved OSCAR programme. Some families may be eligible to claim the Work and Income OSCAR subsidy. Please contact Work and Income (0800 559 009) directly to check if you are eligible.

Policies

A full Policies and Procedures manual is available on site at all times. These policies follow the guidelines as recommended by CYF and the Out of School Care Network (OSCAR).

PAYMENT SECTION

- ☐ I understand that 50% of Holiday Programme fees is required in advance on enrolment.
- ☐ I understand that weekly invoices thereafter must be paid within **seven (7) days** of receipt of invoice.
- ☐ I understand that any unpaid amount older than one month from date of invoice, will be sent to Debt Collection for recovery and any cost incurred in that recovery will be paid by myself.

Parent/Caregiver Initials: _____

Cool Kids

Terms and Conditions - Holiday Programme

Parent Responsibilities

Parents or Caregivers are required to SIGN OUT on the attendance sheet with the exact time and advise the supervisor before leaving with their child/children.

Only persons named as authorised to collect your child on the Enrolment Contract will be permitted to leave the site with the child/children. Any deviation from the named authority to collect a child must be advised to programme staff.

Please retain these Terms and Conditions for your reference. A copy of the completed and signed Enrolment Contract is available upon request.

Enrolment

By enrolling your child in Cool Kids, you and Warkworth School make a binding agreement regarding the care of your child. By signing the Enrolment Contract, you acknowledge that you have read and understood our Terms and Conditions and agree to abide by them. An Enrolment Contract must be completed and signed before a child is accepted in the programme.

Enrolment will be on a first come, first served bases. Your child's place is not guaranteed in our programme unless you have received confirmation from the Programme Supervisor.

Please notify us if your child is unwell and unable to attend, or if someone other than those named on the Enrolment Contract will be picking your child up.

The parent/caregiver signing the Enrolment Contract gives permission for their child to be photographed by staff. Any such photographs will only be used by Cool Kids Warkworth for promotional purposes.

Fees and Payments

For all Holiday Programmes, **an Enrolment Contract and 50% deposit of fees will be required to secure a place.** Once a booking has been made, **any cancellation** must be in writing, **FIVE working days** in advance, otherwise **full payment** is required.

Please phone/text Cool Kids directly with any absences on 027 931 1311.

An additional charge will be made for late pick up from the programme of \$1.50 for each 1 minute, or part thereof, that your child and our staff are kept waiting after the advertised end of the programme.

Invoices for care will be emailed weekly in arrears.

Payment may be made by eftpos, credit card, cheque, cash, or by automatic payment or internet banking to 12-3095-0158890-57. Please use your child's surname in particulars and invoice number. Please make cheques payable to Warkworth Primary School.

Discount Available

A 10% discount applies for four days booked and attended in the same week, per child per week.

A 10% discount applies for 2 children (siblings only) and 20% applies for 3 or more children (siblings only) attending the same day.

Discount is not available to WINZ clients.

Health and Safety

In the event of an accident the parent/caregiver signing the Enrolment Contract authorises programme staff to obtain medical assistance as may be deemed necessary. Should your child need to be transported from the site in an emergency situation, our Transport Policy will be adhered to by staff.

Access arrangements for your child must be detailed on the Enrolment Contract. Please inform the supervisor of any safety or custody issues that may affect your child's wellbeing and security.

CYF Guidelines are followed should an allegation or suspicion of child abuse occur.

Behaviour Management

Where a child or group of children's behaviour threatens the safety and/or enjoyment of the other programme participants or members of the general public, the child or children may be withdrawn from the programme and the responsible parent/caregiver contacted to collect their child from the programme. This procedure is most likely to be initiated where a child repeatedly disrespects the direction given by staff. No refund will be given if a child is withdrawn from the programme for disruptive behaviour.

Personal Property

Staff can take no responsibility for loss or damage to children's personal property.

Acceptance of Terms and Conditions

☐ I have read and understood the Parent Information and Terms and Conditions and agree to abide by them.

Parent/Caregiver Signature

Cool Kids Warkworth

Enrolment Contract - Holiday Programme (4 Weeks)

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Residential/Postal Address (if different from child's above)	<input type="text"/>	Mobile	<input type="text"/>	

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Name	<input type="text"/>			
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Name (1)

Home phone (1)

Relationship to child (1)

Mobile (1)

Name (2)

Home phone (2)

Relationship to child (2)

Mobile (2)

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	Before/After Care	Before	After	Before	After	Before	After	Before	After	Before	After

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Parent/Caregiver Signature

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Enrolment Contract - Holiday Programme (4 Weeks)

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Relationship to child	<input type="text"/>	Home phone	<input type="text"/>	
Email	<input type="text"/>	Business phone	<input type="text"/>	
Residential/Postal Address (if different from child's above)	<input type="text"/>	Mobile	<input type="text"/>	

4 PARENT / CAREGIVER 2

Name	<input type="text"/>			
Relationship to child	<input type="text"/>	Home phone	<input type="text"/>	
Email	<input type="text"/>	Business phone	<input type="text"/>	
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5 ALTERNATIVE EMERGENCY CONTACT – This must be provided

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Name (1)

Home phone (1)

Relationship to child (1)

Mobile (1)

Name (2)

Home phone (2)

Relationship to child (2)

Mobile (2)

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Relationship to child	<input type="text"/>	Home phone	<input type="text"/>	
Email	<input type="text"/>	Business phone	<input type="text"/>	
Residential/Postal Address (if different from child's above)	<input type="text"/>	Mobile	<input type="text"/>	

4 PARENT / CAREGIVER 2

Name	<input type="text"/>			
Relationship to child	<input type="text"/>	Home phone	<input type="text"/>	
Email	<input type="text"/>	Business phone	<input type="text"/>	
Residential/Postal Address (if different from child's above)	<input type="text"/>	Mobile	<input type="text"/>	

5 ALTERNATIVE EMERGENCY CONTACT – This must be provided

Name	<input type="text"/>		
Relationship to child	<input type="text"/>	Phone	<input type="text"/>

6 AUTHORISED ACCESS - Any changes to this section must be notified in writing to Warkworth School.

Is anyone forbidden by law to have access to the child who is enrolled on this contract? ☐ NO ☐ YES

If YES, please provide a copy of the legal document that supports this claim. Supplied on [date]

7 WHO, OTHER THAN THE PERSON SIGNING THIS FORM, IS AUTHORISED TO PICK UP THIS CHILD FROM THIS PROGRAMME?

Name (1)

Home phone (1)

Relationship to child (1)

Mobile (1)

Name (2)

Home phone (2)

Relationship to child (2)

Mobile (2)

8 ATTENDANCE - Please indicate the days and hours your child will be attending.

Expected Start Date:

		Monday		Tuesday		Wednesday		Thursday		Friday	
Week 1	Holiday Programme										
	Before/After Care	Before	After	Before	After	Before	After	Before	After	Before	After
Week 2	Holiday Programme										
	Before/After Care	Before	After	Before	After	Before	After	Before	After	Before	After
Week 3	Holiday Programme										
	Before/After Care	Before	After	Before	After	Before	After	Before	After	Before	After
Week 4	Holiday Programme					N/A		N/A		N/A	
	Before/After Care	Before	After	Before	After	Before	After	Before	After	Before	After

Please Note: If you have care requirements for times other than the above, please contact the Supervisor directly (027 931 1311) to discuss as flexibility of hours is possible on non-trip days.

DISCLAIMER

- I have read the parent information and agree to abide by the Terms and Conditions of 'Cool Kids' Warkworth OSCAR programme. Any changes to the Terms and Conditions will be notified to me.
- I acknowledge that Cool Kids Warkworth management or staff will not be liable for any loss or damage arising (by way of accident, injury, theft or otherwise) out of attendance at the Cool Kids.
- I accept responsibility for any expenses incurred in obtaining treatment for my child in an emergency situation.
- I give permission for my child to be taken to an alternative location (eg civil defence centre) in the event of an emergency situation and for my child to be transported in accordance with the Transport Policy.
- I agree to pay fees as stipulated in the Fees Policy.

PRIVACY ACT

Information collected will be used for the purpose of establishing and maintaining accurate records held by Cool Kids Warkworth. Children's individual files will be available for perusal by parents / caregivers with authorised access. (All personal information will be destroyed at the completion of your child's time in the programme.)

Name

Signature

Date

Cool Kids

Parent Information – Holiday Programme

Cool Kids Before & After Care Programme has been established to provide quality care for children attending our holiday programme.

It operates from the Senior Area Hall between the hours of 7:30 – 9.00am and 3:00 - 6:00pm, Monday to Friday at a cost of \$7.50 per hour.

The completion of an enrolment form is necessary before a child can enter the programme.

It is Cool Kids intention to provide a professional service, which will give your child a safe, secure environment and enjoyable care experience.

Afternoon Tea

Children enrolled in After Care will receive a light snack and drink for afternoon tea. This may include seasonal fruit, sandwiches, biscuits and occasionally scones and baking, made as part of the programme.

Please advise if there is any food your child is not allowed.

Collecting Your Child

When arriving to collect your child please sign them out on the Attendance Sheet with the exact time, and advise the Programme Supervisor you are taking your child.

Complaints

The programme has a complaints procedure. If you have any problems, please approach the Supervisor who will be happy to assist you with your concerns.

Supervision Ratios

The programme will operate on a ratio of 1:10, as recommended by MSD. There will be an appropriate number of staff on duty, with a minimum of 2 staff on at all times.

Subsidy

Cool Kids is a MSD approved OSCAR programme. Some families may be eligible to claim the Work and Income OSCAR subsidy. Please contact Work and Income (0800 559 009) directly to check if you are eligible.

Policies

A full Policies and Procedures manual is available on site at all times. These policies follow the guidelines as recommended by CYF and the Out of School Care Network (OSCAR).

PAYMENT SECTION

- ☐ I understand that 50% of Holiday Programme fees is required in advance on enrolment.
- ☐ I understand that weekly invoices thereafter must be paid within **seven (7) days** of receipt of invoice.
- ☐ I understand that any unpaid amount older than one month from date of invoice, will be sent to Debt Collection for recovery and any cost incurred in that recovery will be paid by myself.

Parent/Caregiver Initials: _____

Cool Kids

Terms and Conditions - Holiday Programme

Parent Responsibilities

Parents or Caregivers are required to SIGN OUT on the attendance sheet with the exact time and advise the supervisor before leaving with their child/children.

Only persons named as authorised to collect your child on the Enrolment Contract will be permitted to leave the site with the child/children. Any deviation from the named authority to collect a child must be advised to programme staff.

Please retain these Terms and Conditions for your reference. A copy of the completed and signed Enrolment Contract is available upon request.

Enrolment

By enrolling your child in Cool Kids, you and Warkworth School make a binding agreement regarding the care of your child. By signing the Enrolment Contract, you acknowledge that you have read and understood our Terms and Conditions and agree to abide by them. An Enrolment Contract must be completed and signed before a child is accepted in the programme.

Enrolment will be on a first come, first served bases. Your child's place is not guaranteed in our programme unless you have received confirmation from the Programme Supervisor.

Please notify us if your child is unwell and unable to attend, or if someone other than those named on the Enrolment Contract will be picking your child up.

The parent/caregiver signing the Enrolment Contract gives permission for their child to be photographed by staff. Any such photographs will only be used by Cool Kids Warkworth for promotional purposes.

Fees and Payments

For all Holiday Programmes, **an Enrolment Contract and 50% deposit of fees will be required to secure a place.** Once a booking has been made, **any cancellation** must be in writing, **FIVE working days** in advance, otherwise **full payment** is required.

Please phone/text Cool Kids directly with any absences on 027 931 1311.

An additional charge will be made for late pick up from the programme of \$1.50 for each 1 minute, or part thereof, that your child and our staff are kept waiting after the advertised end of the programme.

Invoices for care will be emailed weekly in arrears.

Payment may be made by eftpos, credit card, cheque, cash, or by automatic payment or internet banking to 12-3095-0158890-57. Please use your child's surname in particulars and invoice number. Please make cheques payable to Warkworth Primary School.

Discount Available

A 10% discount applies for four days booked and attended in the same week, per child per week.

A 10% discount applies for 2 children (siblings only) and 20% applies for 3 or more children (siblings only) attending the same day.

Discount is not available to WINZ clients.

Health and Safety

In the event of an accident the parent/caregiver signing the Enrolment Contract authorises programme staff to obtain medical assistance as may be deemed necessary. Should your child need to be transported from the site in an emergency situation, our Transport Policy will be adhered to by staff.

Access arrangements for your child must be detailed on the Enrolment Contract. Please inform the supervisor of any safety or custody issues that may affect your child's wellbeing and security.

CYF Guidelines are followed should an allegation or suspicion of child abuse occur.

Behaviour Management

Where a child or group of children's behaviour threatens the safety and/or enjoyment of the other programme participants or members of the general public, the child or children may be withdrawn from the programme and the responsible parent/caregiver contacted to collect their child from the programme. This procedure is most likely to be initiated where a child repeatedly disrespects the direction given by staff. No refund will be given if a child is withdrawn from the programme for disruptive behaviour.

Personal Property

Staff can take no responsibility for loss or damage to children's personal property.

Acceptance of Terms and Conditions

☐ I have read and understood the Parent Information and Terms and Conditions and agree to abide by them.

Parent/Caregiver Signature

Cool Kids Warkworth

Enrolment Contract - Holiday Programme (4 Weeks)

Please complete all sections and **PRINT** clearly.

1 CHILD DETAILS

FAMILY NAME	<input type="text"/>	Home phone	<input type="text"/>		
Child's Name (1)	<input type="text"/>	Age	<input type="text"/>	Boy	<input type="text"/>
				Girl	<input type="text"/>
Residential Address	<input type="text"/>				
School Attended	<input type="text"/>	Year Level	<input type="text"/>	Ethnicity	<input type="text"/>

2 PLEASE SPECIFY ANY MEDICAL CONDITIONS, OR ALLERGIES YOUR CHILD HAS, INCLUDING ADHD, ANY SPECIAL DIETARY NEEDS AND ANY SPECIAL NEEDS OR CIRCUMSTANCES ABOUT WHICH WE SHOULD BE MADE AWARE.

If your child requires medication administered while attending this programme, you are required to complete a separate MEDICAL CONSENT FORM. Please ask staff on site.

Family Doctor	<input type="text"/>	Phone	<input type="text"/>
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3 PARENT / CAREGIVER 1

Name	<input type="text"/>			
Relationship to child	<input type="text"/>	Home phone	<input type="text"/>	
Email	<input type="text"/>	Business phone	<input type="text"/>	
Residential/Postal Address (if different from child's above)	<input type="text"/>	Mobile	<input type="text"/>	

4 PARENT / CAREGIVER 2

Name	<input type="text"/>			
Relationship to child	<input type="text"/>	Home phone	<input type="text"/>	
Email	<input type="text"/>	Business phone	<input type="text"/>	
Residential/Postal Address (if different from child's above)	<input type="text"/>	Mobile	<input type="text"/>	

5 ALTERNATIVE EMERGENCY CONTACT – This must be provided

Name	<input type="text"/>		
Relationship to child	<input type="text"/>	Phone	<input type="text"/>

6 AUTHORISED ACCESS - Any changes to this section must be notified in writing to Warkworth School.

Is anyone forbidden by law to have access to the child who is enrolled on this contract? ☐ NO ☐ YES

If YES, please provide a copy of the legal document that supports this claim. Supplied on [date]

7 WHO, OTHER THAN THE PERSON SIGNING THIS FORM, IS AUTHORISED TO PICK UP THIS CHILD FROM THIS PROGRAMME?

Name (1)	<input type="text"/>	Home phone (1)	<input type="text"/>
Relationship to child (1)	<input type="text"/>	Mobile (1)	<input type="text"/>
Name (2)	<input type="text"/>	Home phone (2)	<input type="text"/>
Relationship to child (2)	<input type="text"/>	Mobile (2)	<input type="text"/>

8 ATTENDANCE - Please indicate the days and hours your child will be attending.

Expected Start Date:

		Monday		Tuesday		Wednesday		Thursday		Friday	
Week 1	Holiday Programme										
	Before/After Care	Before	After	Before	After	Before	After	Before	After	Before	After
Week 2	Holiday Programme										
	Before/After Care	Before	After	Before	After	Before	After	Before	After	Before	After
Week 3	Holiday Programme										
	Before/After Care	Before	After	Before	After	Before	After	Before	After	Before	After
Week 4	Holiday Programme					N/A		N/A		N/A	
	Before/After Care	Before	After	Before	After	Before	After	Before	After	Before	After

Please Note: If you have care requirements for times other than the above, please contact the Supervisor directly (027 931 1311) to discuss as flexibility of hours is possible on non-trip days.

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Name	<input type="text"/>
Signature	<input type="text"/>
Date	<input type="text"/>

Cool Kids

Parent Information – Holiday Programme

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Please notify us if your child is unwell and unable to attend, or if someone other than those named on the Enrolment Contract will be picking your child up.

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Personal Property

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Acceptance of Terms and Conditions

☐ I have read and understood the Parent Information and Terms and Conditions and agree to abide by them.

Parent/Caregiver Signature

Cool Kids Warkworth

Enrolment Contract - Holiday Programme (4 Weeks)

Please complete all sections and **PRINT** clearly.

1 CHILD DETAILS

FAMILY NAME	<input type="text"/>	Home phone	<input type="text"/>		
Child's Name (1)	<input type="text"/>	Age	<input type="text"/>	Boy	<input type="text"/>
				Girl	<input type="text"/>
Residential Address	<input type="text"/>				
School Attended	<input type="text"/>	Year Level	<input type="text"/>	Ethnicity	<input type="text"/>

2 PLEASE SPECIFY ANY MEDICAL CONDITIONS, OR ALLERGIES YOUR CHILD HAS, INCLUDING ADHD, ANY SPECIAL DIETARY NEEDS AND ANY SPECIAL NEEDS OR CIRCUMSTANCES ABOUT WHICH WE SHOULD BE MADE AWARE.

If your child requires medication administered while attending this programme, you are required to complete a separate MEDICAL CONSENT FORM. Please ask staff on site.

Family Doctor	<input type="text"/>	Phone	<input type="text"/>
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3 PARENT / CAREGIVER 1

Name	<input type="text"/>			
Relationship to child	<input type="text"/>	Home phone	<input type="text"/>	
Email	<input type="text"/>	Business phone	<input type="text"/>	
Residential/Postal Address (if different from child's above)	<input type="text"/>	Mobile	<input type="text"/>	

4 PARENT / CAREGIVER 2

Name	<input type="text"/>			
Relationship to child	<input type="text"/>	Home phone	<input type="text"/>	
Email	<input type="text"/>	Business phone	<input type="text"/>	
Residential/Postal Address (if different from child's above)	<input type="text"/>	Mobile	<input type="text"/>	

5 ALTERNATIVE EMERGENCY CONTACT – This must be provided

Name	<input type="text"/>		
Relationship to child	<input type="text"/>	Phone	<input type="text"/>

6 AUTHORISED ACCESS - Any changes to this section must be notified in writing to Warkworth School.

Is anyone forbidden by law to have access to the child who is enrolled on this contract? ☐ NO ☐ YES

If YES, please provide a copy of the legal document that supports this claim. Supplied on [date]

7 WHO, OTHER THAN THE PERSON SIGNING THIS FORM, IS AUTHORISED TO PICK UP THIS CHILD FROM THIS PROGRAMME?

Name (1)

Home phone (1)

Relationship to child (1)

Mobile (1)

Name (2)

Home phone (2)

Relationship to child (2)

Mobile (2)

8 ATTENDANCE - Please indicate the days and hours your child will be attending.

Expected Start Date:

		Monday		Tuesday		Wednesday		Thursday		Friday	
Week 1	Holiday Programme										
	Before/After Care	Before	After	Before	After	Before	After	Before	After	Before	After
Week 2	Holiday Programme										
	Before/After Care	Before	After	Before	After	Before	After	Before	After	Before	After
Week 3	Holiday Programme										
	Before/After Care	Before	After	Before	After	Before	After	Before	After	Before	After
Week 4	Holiday Programme					N/A		N/A		N/A	
	Before/After Care	Before	After	Before	After	Before	After	Before	After	Before	After

Please Note: If you have care requirements for times other than the above, please contact the Supervisor directly (027 931 1311) to discuss as flexibility of hours is possible on non-trip days.

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Name

Signature

Date

Cool Kids

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Parent/Caregiver Initials: _____

Cool Kids

Terms and Conditions - Holiday Programme

Parent Responsibilities

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Acceptance of Terms and Conditions

☐ I have read and understood the Parent Information and Terms and Conditions and agree to abide by them.

Parent/Caregiver Signature

Cool Kids Warkworth

Enrolment Contract - Holiday Programme (4 Weeks)

Please complete all sections and **PRINT** clearly.

1 CHILD DETAILS

FAMILY NAME	<input type="text"/>	Home phone	<input type="text"/>		
Child's Name (1)	<input type="text"/>	Age	<input type="text"/>	Boy	<input type="text"/>
				Girl	<input type="text"/>
Residential Address	<input type="text"/>				
School Attended	<input type="text"/>	Year Level	<input type="text"/>	Ethnicity	<input type="text"/>

2 PLEASE SPECIFY ANY MEDICAL CONDITIONS, OR ALLERGIES YOUR CHILD HAS, INCLUDING ADHD, ANY SPECIAL DIETARY NEEDS AND ANY SPECIAL NEEDS OR CIRCUMSTANCES ABOUT WHICH WE SHOULD BE MADE AWARE.

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Family Doctor	<input type="text"/>	Phone	<input type="text"/>
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3 PARENT / CAREGIVER 1

Name	<input type="text"/>				
Relationship to child	<input type="text"/>	Home phone	<input type="text"/>		
Email	<input type="text"/>	Business phone	<input type="text"/>		
Residential/Postal Address (if different from child's above)	<input type="text"/>	Mobile	<input type="text"/>		

4 PARENT / CAREGIVER 2

Name	<input type="text"/>				
Relationship to child	<input type="text"/>	Home phone	<input type="text"/>		
Email	<input type="text"/>	Business phone	<input type="text"/>		
Residential/Postal Address (if different from child's above)	<input type="text"/>	Mobile	<input type="text"/>		

5 ALTERNATIVE EMERGENCY CONTACT – This must be provided

Name	<input type="text"/>				
Relationship to child	<input type="text"/>	Phone	<input type="text"/>		

6 AUTHORISED ACCESS - Any changes to this section must be notified in writing to Warkworth School.

Is anyone forbidden by law to have access to the child who is enrolled on this contract? ☐ NO ☐ YES

If YES, please provide a copy of the legal document that supports this claim. Supplied on [date]

7 WHO, OTHER THAN THE PERSON SIGNING THIS FORM, IS AUTHORISED TO PICK UP THIS CHILD FROM THIS PROGRAMME?

Name (1)

Home phone (1)

Relationship to child (1)

Mobile (1)

Name (2)

Home phone (2)

Relationship to child (2)

Mobile (2)

8 ATTENDANCE - Please indicate the days and hours your child will be attending.

Expected Start Date:

		Monday		Tuesday		Wednesday		Thursday		Friday	
Week 1	Holiday Programme										
	Before/After Care	Before	After	Before	After	Before	After	Before	After	Before	After
Week 2	Holiday Programme										
	Before/After Care	Before	After	Before	After	Before	After	Before	After	Before	After
Week 3	Holiday Programme										
	Before/After Care	Before	After	Before	After	Before	After	Before	After	Before	After
Week 4	Holiday Programme					N/A		N/A		N/A	
	Before/After Care	Before	After	Before	After	Before	After	Before	After	Before	After

Please Note: If you have care requirements for times other than the above, please contact the Supervisor directly (027 931 1311) to discuss as flexibility of hours is possible on non-trip days.

DISCLAIMER

- I have read the parent information and agree to abide by the Terms and Conditions of 'Cool Kids' Warkworth OSCAR programme. Any changes to the Terms and Conditions will be notified to me.
- I acknowledge that Cool Kids Warkworth management or staff will not be liable for any loss or damage arising (by way of accident, injury, theft or otherwise) out of attendance at the Cool Kids.
- I accept responsibility for any expenses incurred in obtaining treatment for my child in an emergency situation.
- I give permission for my child to be taken to an alternative location (eg civil defence centre) in the event of an emergency situation and for my child to be transported in accordance with the Transport Policy.
- I agree to pay fees as stipulated in the Fees Policy.

PRIVACY ACT

Information collected will be used for the purpose of establishing and maintaining accurate records held by Cool Kids Warkworth. Children's individual files will be available for perusal by parents / caregivers with authorised access. (All personal information will be destroyed at the completion of your child's time in the programme.)

Name

Signature

Date

Cool Kids

Parent Information – Holiday Programme

Cool Kids Before & After Care Programme has been established to provide quality care for children attending our holiday programme.

It operates from the Senior Area Hall between the hours of 7:30 – 9.00am and 3:00 - 6:00pm, Monday to Friday at a cost of \$7.50 per hour.

The completion of an enrolment form is necessary before a child can enter the programme.

It is Cool Kids intention to provide a professional service, which will give your child a safe, secure environment and enjoyable care experience.

Afternoon Tea

Children enrolled in After Care will receive a light snack and drink for afternoon tea. This may include seasonal fruit, sandwiches, biscuits and occasionally scones and baking, made as part of the programme.

Please advise if there is any food your child is not allowed.

Collecting Your Child

When arriving to collect your child please sign them out on the Attendance Sheet with the exact time, and advise the Programme Supervisor you are taking your child.

Complaints

The programme has a complaints procedure. If you have any problems, please approach the Supervisor who will be happy to assist you with your concerns.

Supervision Ratios

The programme will operate on a ratio of 1:10, as recommended by MSD. There will be an appropriate number of staff on duty, with a minimum of 2 staff on at all times.

Subsidy

Cool Kids is a MSD approved OSCAR programme. Some families may be eligible to claim the Work and Income OSCAR subsidy. Please contact Work and Income (0800 559 009) directly to check if you are eligible.

Policies

A full Policies and Procedures manual is available on site at all times. These policies follow the guidelines as recommended by CYF and the Out of School Care Network (OSCAR).

PAYMENT SECTION

- ☐ I understand that 50% of Holiday Programme fees is required in advance on enrolment.
- ☐ I understand that weekly invoices thereafter must be paid within **seven (7) days** of receipt of invoice.
- ☐ I understand that any unpaid amount older than one month from date of invoice, will be sent to Debt Collection for recovery and any cost incurred in that recovery will be paid by myself.

Parent/Caregiver Initials: _____

Cool Kids

Terms and Conditions - Holiday Programme

Parent Responsibilities

Parents or Caregivers are required to SIGN OUT on the attendance sheet with the exact time and advise the supervisor before leaving with their child/children.

Only persons named as authorised to collect your child on the Enrolment Contract will be permitted to leave the site with the child/children. Any deviation from the named authority to collect a child must be advised to programme staff.

Please retain these Terms and Conditions for your reference. A copy of the completed and signed Enrolment Contract is available upon request.

Enrolment

By enrolling your child in Cool Kids, you and Warkworth School make a binding agreement regarding the care of your child. By signing the Enrolment Contract, you acknowledge that you have read and understood our Terms and Conditions and agree to abide by them. An Enrolment Contract must be completed and signed before a child is accepted in the programme.

Enrolment will be on a first come, first served bases. Your child's place is not guaranteed in our programme unless you have received confirmation from the Programme Supervisor.

Please notify us if your child is unwell and unable to attend, or if someone other than those named on the Enrolment Contract will be picking your child up.

The parent/caregiver signing the Enrolment Contract gives permission for their child to be photographed by staff. Any such photographs will only be used by Cool Kids Warkworth for promotional purposes.

Fees and Payments

For all Holiday Programmes, **an Enrolment Contract and 50% deposit of fees will be required to secure a place.** Once a booking has been made, **any cancellation** must be in writing, **FIVE working days** in advance, otherwise **full payment** is required.

Please phone/text Cool Kids directly with any absences on 027 931 1311.

An additional charge will be made for late pick up from the programme of \$1.50 for each 1 minute, or part thereof, that your child and our staff are kept waiting after the advertised end of the programme.

Invoices for care will be emailed weekly in arrears.

Payment may be made by eftpos, credit card, cheque, cash, or by automatic payment or internet banking to 12-3095-0158890-57. Please use your child's surname in particulars and invoice number. Please make cheques payable to Warkworth Primary School.

Discount Available

A 10% discount applies for four days booked and attended in the same week, per child per week.

A 10% discount applies for 2 children (siblings only) and 20% applies for 3 or more children (siblings only) attending the same day.

Discount is not available to WINZ clients.

Health and Safety

In the event of an accident the parent/caregiver signing the Enrolment Contract authorises programme staff to obtain medical assistance as may be deemed necessary. Should your child need to be transported from the site in an emergency situation, our Transport Policy will be adhered to by staff.

Access arrangements for your child must be detailed on the Enrolment Contract. Please inform the supervisor of any safety or custody issues that may affect your child's wellbeing and security.

CYF Guidelines are followed should an allegation or suspicion of child abuse occur.

Behaviour Management

Where a child or group of children's behaviour threatens the safety and/or enjoyment of the other programme participants or members of the general public, the child or children may be withdrawn from the programme and the responsible parent/caregiver contacted to collect their child from the programme. This procedure is most likely to be initiated where a child repeatedly disrespects the direction given by staff. No refund will be given if a child is withdrawn from the programme for disruptive behaviour.

Personal Property

Staff can take no responsibility for loss or damage to children's personal property.

Acceptance of Terms and Conditions

☐ I have read and understood the Parent Information and Terms and Conditions and agree to abide by them.

Parent/Caregiver Signature

Cool Kids Warkworth

Enrolment Contract - Holiday Programme (4 Weeks)

Please complete all sections and **PRINT** clearly.

1 CHILD DETAILS

FAMILY NAME	<input type="text"/>	Home phone	<input type="text"/>		
Child's Name (1)	<input type="text"/>	Age	<input type="text"/>	Boy	<input type="text"/>
				Girl	<input type="text"/>
Residential Address	<input type="text"/>				
School Attended	<input type="text"/>	Year Level	<input type="text"/>	Ethnicity	<input type="text"/>

2 PLEASE SPECIFY ANY MEDICAL CONDITIONS, OR ALLERGIES YOUR CHILD HAS, INCLUDING ADHD, ANY SPECIAL DIETARY NEEDS AND ANY SPECIAL NEEDS OR CIRCUMSTANCES ABOUT WHICH WE SHOULD BE MADE AWARE.

If your child requires medication administered while attending this programme, you are required to complete a separate MEDICAL CONSENT FORM. Please ask staff on site.

Family Doctor	<input type="text"/>	Phone	<input type="text"/>
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3 PARENT / CAREGIVER 1

Name	<input type="text"/>			
Relationship to child	<input type="text"/>	Home phone	<input type="text"/>	
Email	<input type="text"/>	Business phone	<input type="text"/>	
Residential/Postal Address (if different from child's above)	<input type="text"/>	Mobile	<input type="text"/>	

4 PARENT / CAREGIVER 2

Name	<input type="text"/>			
Relationship to child	<input type="text"/>	Home phone	<input type="text"/>	
Email	<input type="text"/>	Business phone	<input type="text"/>	
Residential/Postal Address (if different from child's above)	<input type="text"/>	Mobile	<input type="text"/>	

5 ALTERNATIVE EMERGENCY CONTACT – This must be provided

Name	<input type="text"/>		
Relationship to child	<input type="text"/>	Phone	<input type="text"/>

6 AUTHORISED ACCESS - Any changes to this section must be notified in writing to Warkworth School.

Is anyone forbidden by law to have access to the child who is enrolled on this contract? ☐ NO ☐ YES

If YES, please provide a copy of the legal document that supports this claim. Supplied on [date]

7 WHO, OTHER THAN THE PERSON SIGNING THIS FORM, IS AUTHORISED TO PICK UP THIS CHILD FROM THIS PROGRAMME?

Name (1)

Home phone (1)

Relationship to child (1)

Mobile (1)

Name (2)

Home phone (2)

Relationship to child (2)

Mobile (2)

8 ATTENDANCE - Please indicate the days and hours your child will be attending.

Expected Start Date:

		Monday		Tuesday		Wednesday		Thursday		Friday	
Week 1	Holiday Programme										
	Before/After Care	Before	After	Before	After	Before	After	Before	After	Before	After
Week 2	Holiday Programme										
	Before/After Care	Before	After	Before	After	Before	After	Before	After	Before	After
Week 3	Holiday Programme										
	Before/After Care	Before	After	Before	After	Before	After	Before	After	Before	After
Week 4	Holiday Programme					N/A		N/A		N/A	
	Before/After Care	Before	After	Before	After	Before	After	Before	After	Before	After

Please Note: If you have care requirements for times other than the above, please contact the Supervisor directly (027 931 1311) to discuss as flexibility of hours is possible on non-trip days.

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Acceptance of Terms and Conditions

☐ I have read and understood the Parent Information and Terms and Conditions and agree to abide by them.

Parent/Caregiver Signature

Cool Kids Warkworth

Enrolment Contract - Holiday Programme (4 Weeks)

Please complete all sections and **PRINT** clearly.

1 CHILD DETAILS

FAMILY NAME	<input type="text"/>	Home phone	<input type="text"/>		
Child's Name (1)	<input type="text"/>	Age	<input type="text"/>	Boy	<input type="text"/>
				Girl	<input type="text"/>
Residential Address	<input type="text"/>				
School Attended	<input type="text"/>	Year Level	<input type="text"/>	Ethnicity	<input type="text"/>

2 PLEASE SPECIFY ANY MEDICAL CONDITIONS, OR ALLERGIES YOUR CHILD HAS, INCLUDING ADHD, ANY SPECIAL DIETARY NEEDS AND ANY SPECIAL NEEDS OR CIRCUMSTANCES ABOUT WHICH WE SHOULD BE MADE AWARE.

If your child requires medication administered while attending this programme, you are required to complete a separate MEDICAL CONSENT FORM. Please ask staff on site.

Family Doctor	<input type="text"/>	Phone	<input type="text"/>
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3 PARENT / CAREGIVER 1

Name	<input type="text"/>			
Relationship to child	<input type="text"/>	Home phone	<input type="text"/>	
Email	<input type="text"/>	Business phone	<input type="text"/>	
Residential/Postal Address (if different from child's above)	<input type="text"/>	Mobile	<input type="text"/>	

4 PARENT / CAREGIVER 2

Name	<input type="text"/>			
Relationship to child	<input type="text"/>	Home phone	<input type="text"/>	
Email	<input type="text"/>	Business phone	<input type="text"/>	
Residential/Postal Address (if different from child's above)	<input type="text"/>	Mobile	<input type="text"/>	

5 ALTERNATIVE EMERGENCY CONTACT – This must be provided

Name	<input type="text"/>		
Relationship to child	<input type="text"/>	Phone	<input type="text"/>

6 AUTHORISED ACCESS - Any changes to this section must be notified in writing to Warkworth School.

Is anyone forbidden by law to have access to the child who is enrolled on this contract? ☐ NO ☐ YES

If YES, please provide a copy of the legal document that supports this claim. Supplied on [date]

7 WHO, OTHER THAN THE PERSON SIGNING THIS FORM, IS AUTHORISED TO PICK UP THIS CHILD FROM THIS PROGRAMME?

Name (1)

Home phone (1)

Relationship to child (1)

Mobile (1)

Name (2)

Home phone (2)

Relationship to child (2)

Mobile (2)

8 ATTENDANCE - Please indicate the days and hours your child will be attending.

Expected Start Date:

		Monday		Tuesday		Wednesday		Thursday		Friday	
Week 1	Holiday Programme										
	Before/After Care	Before	After	Before	After	Before	After	Before	After	Before	After
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	Before/After Care	Before	After	Before	After	Before	After	Before	After	Before	After
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Week 4	Holiday Programme					N/A		N/A		N/A	
	Before/After Care	Before	After	Before	After	Before	After	Before	After	Before	After

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Signature

Date

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Parent/Caregiver Initials: _____

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Terms and Conditions - Holiday Programme

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Parent/Caregiver Signature

Cool Kids Warkworth

Enrolment Contract - Holiday Programme (4 Weeks)

Please complete all sections and **PRINT** clearly.

1 CHILD DETAILS

FAMILY NAME	<input type="text"/>	Home phone	<input type="text"/>		
Child's Name (1)	<input type="text"/>	Age	<input type="text"/>	Boy	<input type="text"/>
				Girl	<input type="text"/>
Residential Address	<input type="text"/>				
School Attended	<input type="text"/>	Year Level	<input type="text"/>	Ethnicity	<input type="text"/>

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3 PARENT / CAREGIVER 1

Name	<input type="text"/>			
Relationship to child	<input type="text"/>	Home phone	<input type="text"/>	
Email	<input type="text"/>	Business phone	<input type="text"/>	
Residential/Postal Address (if different from child's above)	<input type="text"/>	Mobile	<input type="text"/>	

4 PARENT / CAREGIVER 2

Name	<input type="text"/>			
Relationship to child	<input type="text"/>	Home phone	<input type="text"/>	
Email	<input type="text"/>	Business phone	<input type="text"/>	
Residential/Postal Address (if different from child's above)	<input type="text"/>	Mobile	<input type="text"/>	

5 ALTERNATIVE EMERGENCY CONTACT – This must be provided

Name	<input type="text"/>		
Relationship to child	<input type="text"/>	Phone	<input type="text"/>

6 AUTHORISED ACCESS - Any changes to this section must be notified in writing to Warkworth School.

Is anyone forbidden by law to have access to the child who is enrolled on this contract? ☐ NO ☐ YES

If YES, please provide a copy of the legal document that supports this claim. Supplied on [date]

7 WHO, OTHER THAN THE PERSON SIGNING THIS FORM, IS AUTHORISED TO PICK UP THIS CHILD FROM THIS PROGRAMME?

Name (1)

Home phone (1)

Relationship to child (1)

Mobile (1)

Name (2)

Home phone (2)

Relationship to child (2)

Mobile (2)

8 ATTENDANCE - Please indicate the days and hours your child will be attending.

Expected Start Date:

		Monday		Tuesday		Wednesday		Thursday		Friday	
Week 1	Holiday Programme										
	Before/After Care	Before	After	Before	After	Before	After	Before	After	Before	After
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	Before/After Care	Before	After	Before	After	Before	After	Before	After	Before	After
Week 4	Holiday Programme					N/A		N/A		N/A	
	Before/After Care	Before	After	Before	After	Before	After	Before	After	Before	After

Please Note: If you have care requirements for times other than the above, please contact the Supervisor directly (027 931 1311) to discuss as flexibility of hours is possible on non-trip days.

DISCLAIMER

- I have read the parent information and agree to abide by the Terms and Conditions of 'Cool Kids' Warkworth OSCAR programme. Any changes to the Terms and Conditions will be notified to me.
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- I accept responsibility for any expenses incurred in obtaining treatment for my child in an emergency situation.
- I give permission for my child to be taken to an alternative location (eg civil defence centre) in the event of an emergency situation and for my child to be transported in accordance with the Transport Policy.
- I agree to pay fees as stipulated in the Fees Policy.

PRIVACY ACT

Information collected will be used for the purpose of establishing and maintaining accurate records held by Cool Kids Warkworth. Children's individual files will be available for perusal by parents / caregivers with authorised access. (All personal information will be destroyed at the completion of your child's time in the programme.)

Name

Signature

Date

Cool Kids

Parent Information – Holiday Programme

Cool Kids Before & After Care Programme has been established to provide quality care for children attending our holiday programme.

It operates from the Senior Area Hall between the hours of 7:30 – 9.00am and 3:00 - 6:00pm, Monday to Friday at a cost of \$7.50 per hour.

The completion of an enrolment form is necessary before a child can enter the programme.

It is Cool Kids intention to provide a professional service, which will give your child a safe, secure environment and enjoyable care experience.

Afternoon Tea

Children enrolled in After Care will receive a light snack and drink for afternoon tea. This may include seasonal fruit, sandwiches, biscuits and occasionally scones and baking, made as part of the programme.

Please advise if there is any food your child is not allowed.

Collecting Your Child

When arriving to collect your child please sign them out on the Attendance Sheet with the exact time, and advise the Programme Supervisor you are taking your child.

Complaints

The programme has a complaints procedure. If you have any problems, please approach the Supervisor who will be happy to assist you with your concerns.

Supervision Ratios

The programme will operate on a ratio of 1:10, as recommended by MSD. There will be an appropriate number of staff on duty, with a minimum of 2 staff on at all times.

Subsidy

Cool Kids is a MSD approved OSCAR programme. Some families may be eligible to claim the Work and Income OSCAR subsidy. Please contact Work and Income (0800 559 009) directly to check if you are eligible.

Policies

A full Policies and Procedures manual is available on site at all times. These policies follow the guidelines as recommended by CYF and the Out of School Care Network (OSCAR).

PAYMENT SECTION

- ☐ I understand that 50% of Holiday Programme fees is required in advance on enrolment.
- ☐ I understand that weekly invoices thereafter must be paid within **seven (7) days** of receipt of invoice.
- ☐ I understand that any unpaid amount older than one month from date of invoice, will be sent to Debt Collection for recovery and any cost incurred in that recovery will be paid by myself.

Parent/Caregiver Initials: _____

Cool Kids

Terms and Conditions - Holiday Programme

Parent Responsibilities

Parents or Caregivers are required to SIGN OUT on the attendance sheet with the exact time and advise the supervisor before leaving with their child/children.

Only persons named as authorised to collect your child on the Enrolment Contract will be permitted to leave the site with the child/children. Any deviation from the named authority to collect a child must be advised to programme staff.

Please retain these Terms and Conditions for your reference. A copy of the completed and signed Enrolment Contract is available upon request.

Enrolment

By enrolling your child in Cool Kids, you and Warkworth School make a binding agreement regarding the care of your child. By signing the Enrolment Contract, you acknowledge that you have read and understood our Terms and Conditions and agree to abide by them. An Enrolment Contract must be completed and signed before a child is accepted in the programme.

Enrolment will be on a first come, first served bases. Your child's place is not guaranteed in our programme unless you have received confirmation from the Programme Supervisor.

Please notify us if your child is unwell and unable to attend, or if someone other than those named on the Enrolment Contract will be picking your child up.

The parent/caregiver signing the Enrolment Contract gives permission for their child to be photographed by staff. Any such photographs will only be used by Cool Kids Warkworth for promotional purposes.

Fees and Payments

For all Holiday Programmes, **an Enrolment Contract and 50% deposit of fees will be required to secure a place.** Once a booking has been made, **any cancellation** must be in writing, **FIVE working days** in advance, otherwise **full payment** is required.

Please phone/text Cool Kids directly with any absences on 027 931 1311.

An additional charge will be made for late pick up from the programme of \$1.50 for each 1 minute, or part thereof, that your child and our staff are kept waiting after the advertised end of the programme.

Invoices for care will be emailed weekly in arrears.

Payment may be made by eftpos, credit card, cheque, cash, or by automatic payment or internet banking to 12-3095-0158890-57. Please use your child's surname in particulars and invoice number. Please make cheques payable to Warkworth Primary School.

Discount Available

A 10% discount applies for four days booked and attended in the same week, per child per week.

A 10% discount applies for 2 children (siblings only) and 20% applies for 3 or more children (siblings only) attending the same day.

Discount is not available to WINZ clients.

Health and Safety

In the event of an accident the parent/caregiver signing the Enrolment Contract authorises programme staff to obtain medical assistance as may be deemed necessary. Should your child need to be transported from the site in an emergency situation, our Transport Policy will be adhered to by staff.

Access arrangements for your child must be detailed on the Enrolment Contract. Please inform the supervisor of any safety or custody issues that may affect your child's wellbeing and security.

CYF Guidelines are followed should an allegation or suspicion of child abuse occur.

Behaviour Management

Where a child or group of children's behaviour threatens the safety and/or enjoyment of the other programme participants or members of the general public, the child or children may be withdrawn from the programme and the responsible parent/caregiver contacted to collect their child from the programme. This procedure is most likely to be initiated where a child repeatedly disrespects the direction given by staff. No refund will be given if a child is withdrawn from the programme for disruptive behaviour.

Personal Property

Staff can take no responsibility for loss or damage to children's personal property.

Acceptance of Terms and Conditions

☐ I have read and understood the Parent Information and Terms and Conditions and agree to abide by them.

Parent/Caregiver Signature

Cool Kids Warkworth

Enrolment Contract - Holiday Programme (4 Weeks)

Please complete all sections and **PRINT** clearly.

1 CHILD DETAILS

FAMILY NAME	<input type="text"/>	Home phone	<input type="text"/>		
Child's Name (1)	<input type="text"/>	Age	<input type="text"/>	Boy	<input type="text"/>
				Girl	<input type="text"/>
Residential Address	<input type="text"/>				
School Attended	<input type="text"/>	Year Level	<input type="text"/>	Ethnicity	<input type="text"/>

2 PLEASE SPECIFY ANY MEDICAL CONDITIONS, OR ALLERGIES YOUR CHILD HAS, INCLUDING ADHD, ANY SPECIAL DIETARY NEEDS AND ANY SPECIAL NEEDS OR CIRCUMSTANCES ABOUT WHICH WE SHOULD BE MADE AWARE.

If your child requires medication administered while attending this programme, you are required to complete a separate MEDICAL CONSENT FORM. Please ask staff on site.

Family Doctor	<input type="text"/>	Phone	<input type="text"/>
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3 PARENT / CAREGIVER 1

Name	<input type="text"/>				
Relationship to child	<input type="text"/>	Home phone	<input type="text"/>		
Email	<input type="text"/>	Business phone	<input type="text"/>		
Residential/Postal Address (if different from child's above)	<input type="text"/>	Mobile	<input type="text"/>		

4 PARENT / CAREGIVER 2

Name	<input type="text"/>				
Relationship to child	<input type="text"/>	Home phone	<input type="text"/>		
Email	<input type="text"/>	Business phone	<input type="text"/>		
Residential/Postal Address (if different from child's above)	<input type="text"/>	Mobile	<input type="text"/>		

5 ALTERNATIVE EMERGENCY CONTACT – This must be provided

Name	<input type="text"/>				
Relationship to child	<input type="text"/>	Phone	<input type="text"/>		

6 AUTHORISED ACCESS - Any changes to this section must be notified in writing to Warkworth School.

Is anyone forbidden by law to have access to the child who is enrolled on this contract? ☐ NO ☐ YES

If YES, please provide a copy of the legal document that supports this claim. Supplied on [date]

7 WHO, OTHER THAN THE PERSON SIGNING THIS FORM, IS AUTHORISED TO PICK UP THIS CHILD FROM THIS PROGRAMME?

Name (1)	<input type="text"/>	Home phone (1)	<input type="text"/>
Relationship to child (1)	<input type="text"/>	Mobile (1)	<input type="text"/>
Name (2)	<input type="text"/>	Home phone (2)	<input type="text"/>
Relationship to child (2)	<input type="text"/>	Mobile (2)	<input type="text"/>

8 ATTENDANCE - Please indicate the days and hours your child will be attending.

Expected Start Date:

		Monday		Tuesday		Wednesday		Thursday		Friday	
Week 1	Holiday Programme										
	Before/After Care	Before	After	Before	After	Before	After	Before	After	Before	After
Week 2	Holiday Programme										
	Before/After Care	Before	After	Before	After	Before	After	Before	After	Before	After
Week 3	Holiday Programme										
	Before/After Care	Before	After	Before	After	Before	After	Before	After	Before	After
Week 4	Holiday Programme					N/A		N/A		N/A	
	Before/After Care	Before	After	Before	After	Before	After	Before	After	Before	After

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Name	<input type="text"/>
Signature	<input type="text"/>
Date	<input type="text"/>

Cool Kids

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Personal Property

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Acceptance of Terms and Conditions

☐ I have read and understood the Parent Information and Terms and Conditions and agree to abide by them.

Parent/Caregiver Signature

Cool Kids Warkworth

Enrolment Contract - Holiday Programme (4 Weeks)

Please complete all sections and **PRINT** clearly.

1 CHILD DETAILS

FAMILY NAME	<input type="text"/>	Home phone	<input type="text"/>		
Child's Name (1)	<input type="text"/>	Age	<input type="text"/>	Boy	<input type="text"/>
				Girl	<input type="text"/>
Residential Address	<input type="text"/>				
School Attended	<input type="text"/>	Year Level	<input type="text"/>	Ethnicity	<input type="text"/>

2 PLEASE SPECIFY ANY MEDICAL CONDITIONS, OR ALLERGIES YOUR CHILD HAS, INCLUDING ADHD, ANY SPECIAL DIETARY NEEDS AND ANY SPECIAL NEEDS OR CIRCUMSTANCES ABOUT WHICH WE SHOULD BE MADE AWARE.

If your child requires medication administered while attending this programme, you are required to complete a separate MEDICAL CONSENT FORM. Please ask staff on site.

Family Doctor	<input type="text"/>	Phone	<input type="text"/>
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3 PARENT / CAREGIVER 1

Name	<input type="text"/>			
Relationship to child	<input type="text"/>	Home phone	<input type="text"/>	
Email	<input type="text"/>	Business phone	<input type="text"/>	
Residential/Postal Address (if different from child's above)	<input type="text"/>	Mobile	<input type="text"/>	

4 PARENT / CAREGIVER 2

Name	<input type="text"/>			
Relationship to child	<input type="text"/>	Home phone	<input type="text"/>	
Email	<input type="text"/>	Business phone	<input type="text"/>	
Residential/Postal Address (if different from child's above)	<input type="text"/>	Mobile	<input type="text"/>	

5 ALTERNATIVE EMERGENCY CONTACT – This must be provided

Name	<input type="text"/>		
Relationship to child	<input type="text"/>	Phone	<input type="text"/>

6 AUTHORISED ACCESS - Any changes to this section must be notified in writing to Warkworth School.

Is anyone forbidden by law to have access to the child who is enrolled on this contract? ☐ NO ☐ YES

If YES, please provide a copy of the legal document that supports this claim. Supplied on [date]

7 WHO, OTHER THAN THE PERSON SIGNING THIS FORM, IS AUTHORISED TO PICK UP THIS CHILD FROM THIS PROGRAMME?

Name (1)

Home phone (1)

Relationship to child (1)

Mobile (1)

Name (2)

Home phone (2)

Relationship to child (2)

Mobile (2)

8 ATTENDANCE - Please indicate the days and hours your child will be attending.

Expected Start Date:

		Monday		Tuesday		Wednesday		Thursday		Friday	
Week 1	Holiday Programme										
	Before/After Care	Before	After	Before	After	Before	After	Before	After	Before	After
Week 2	Holiday Programme										
	Before/After Care	Before	After	Before	After	Before	After	Before	After	Before	After
Week 3	Holiday Programme										
	Before/After Care	Before	After	Before	After	Before	After	Before	After	Before	After
Week 4	Holiday Programme					N/A		N/A		N/A	
	Before/After Care	Before	After	Before	After	Before	After	Before	After	Before	After

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Signature

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Parent/Caregiver Initials: _____

Cool Kids

Terms and Conditions - Holiday Programme

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Acceptance of Terms and Conditions

☐ I have read and understood the Parent Information and Terms and Conditions and agree to abide by them.

Parent/Caregiver Signature

Cool Kids Warkworth

Enrolment Contract - Holiday Programme (4 Weeks)

Please complete all sections and **PRINT** clearly.

1 CHILD DETAILS

FAMILY NAME	<input type="text"/>	Home phone	<input type="text"/>		
Child's Name (1)	<input type="text"/>	Age	<input type="text"/>	Boy	<input type="text"/>
				Girl	<input type="text"/>
Residential Address	<input type="text"/>				
School Attended	<input type="text"/>	Year Level	<input type="text"/>	Ethnicity	<input type="text"/>

2 PLEASE SPECIFY ANY MEDICAL CONDITIONS, OR ALLERGIES YOUR CHILD HAS, INCLUDING ADHD, ANY SPECIAL DIETARY NEEDS AND ANY SPECIAL NEEDS OR CIRCUMSTANCES ABOUT WHICH WE SHOULD BE MADE AWARE.

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3 PARENT / CAREGIVER 1

Name	<input type="text"/>			
Relationship to child	<input type="text"/>	Home phone	<input type="text"/>	
Email	<input type="text"/>	Business phone	<input type="text"/>	
Residential/Postal Address (if different from child's above)	<input type="text"/>	Mobile	<input type="text"/>	

4 PARENT / CAREGIVER 2

Name	<input type="text"/>			
Relationship to child	<input type="text"/>	Home phone	<input type="text"/>	
Email	<input type="text"/>	Business phone	<input type="text"/>	
Residential/Postal Address (if different from child's above)	<input type="text"/>	Mobile	<input type="text"/>	

5 ALTERNATIVE EMERGENCY CONTACT – This must be provided

Name	<input type="text"/>		
Relationship to child	<input type="text"/>	Phone	<input type="text"/>

6 AUTHORISED ACCESS - Any changes to this section must be notified in writing to Warkworth School.

Is anyone forbidden by law to have access to the child who is enrolled on this contract? ☐ NO ☐ YES

If YES, please provide a copy of the legal document that supports this claim. Supplied on [date]

7 WHO, OTHER THAN THE PERSON SIGNING THIS FORM, IS AUTHORISED TO PICK UP THIS CHILD FROM THIS PROGRAMME?

Name (1)

Home phone (1)

Relationship to child (1)

Mobile (1)

Name (2)

Home phone (2)

Relationship to child (2)

Mobile (2)

8 ATTENDANCE - Please indicate the days and hours your child will be attending.

Expected Start Date:

		Monday		Tuesday		Wednesday		Thursday		Friday	
Week 1	Holiday Programme										
	Before/After Care	Before	After	Before	After	Before	After	Before	After	Before	After
Week 2	Holiday Programme										
	Before/After Care	Before	After	Before	After	Before	After	Before	After	Before	After
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	Before/After Care	Before	After	Before	After	Before	After	Before	After	Before	After

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- I agree to pay fees as stipulated in the Fees Policy.

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Information collected will be used for the purpose of establishing and maintaining accurate records held by Cool Kids Warkworth. Children's individual files will be available for perusal by parents / caregivers with authorised access. (All personal information will be destroyed at the completion of your child's time in the programme.)

Name

Signature

Date

Cool Kids

Parent Information – Holiday Programme

Cool Kids Before & After Care Programme has been established to provide quality care for children attending our holiday programme.

It operates from the Senior Area Hall between the hours of 7:30 – 9.00am and 3:00 - 6:00pm, Monday to Friday at a cost of \$7.50 per hour.

The completion of an enrolment form is necessary before a child can enter the programme.

It is Cool Kids intention to provide a professional service, which will give your child a safe, secure environment and enjoyable care experience.

Afternoon Tea

Children enrolled in After Care will receive a light snack and drink for afternoon tea. This may include seasonal fruit, sandwiches, biscuits and occasionally scones and baking, made as part of the programme.

Please advise if there is any food your child is not allowed.

Collecting Your Child

When arriving to collect your child please sign them out on the Attendance Sheet with the exact time, and advise the Programme Supervisor you are taking your child.

Complaints

The programme has a complaints procedure. If you have any problems, please approach the Supervisor who will be happy to assist you with your concerns.

Supervision Ratios

The programme will operate on a ratio of 1:10, as recommended by MSD. There will be an appropriate number of staff on duty, with a minimum of 2 staff on at all times.

Subsidy

Cool Kids is a MSD approved OSCAR programme. Some families may be eligible to claim the Work and Income OSCAR subsidy. Please contact Work and Income (0800 559 009) directly to check if you are eligible.

Policies

A full Policies and Procedures manual is available on site at all times. These policies follow the guidelines as recommended by CYF and the Out of School Care Network (OSCAR).

PAYMENT SECTION

- ☐ I understand that 50% of Holiday Programme fees is required in advance on enrolment.
- ☐ I understand that weekly invoices thereafter must be paid within **seven (7) days** of receipt of invoice.
- ☐ I understand that any unpaid amount older than one month from date of invoice, will be sent to Debt Collection for recovery and any cost incurred in that recovery will be paid by myself.

Parent/Caregiver Initials: _____

Cool Kids

Terms and Conditions - Holiday Programme

Parent Responsibilities

Parents or Caregivers are required to SIGN OUT on the attendance sheet with the exact time and advise the supervisor before leaving with their child/children.

Only persons named as authorised to collect your child on the Enrolment Contract will be permitted to leave the site with the child/children. Any deviation from the named authority to collect a child must be advised to programme staff.

Please retain these Terms and Conditions for your reference. A copy of the completed and signed Enrolment Contract is available upon request.

Enrolment

By enrolling your child in Cool Kids, you and Warkworth School make a binding agreement regarding the care of your child. By signing the Enrolment Contract, you acknowledge that you have read and understood our Terms and Conditions and agree to abide by them. An Enrolment Contract must be completed and signed before a child is accepted in the programme.

Enrolment will be on a first come, first served bases. Your child's place is not guaranteed in our programme unless you have received confirmation from the Programme Supervisor.

Please notify us if your child is unwell and unable to attend, or if someone other than those named on the Enrolment Contract will be picking your child up.

The parent/caregiver signing the Enrolment Contract gives permission for their child to be photographed by staff. Any such photographs will only be used by Cool Kids Warkworth for promotional purposes.

Fees and Payments

For all Holiday Programmes, **an Enrolment Contract and 50% deposit of fees will be required to secure a place.** Once a booking has been made, **any cancellation** must be in writing, **FIVE working days** in advance, otherwise **full payment** is required.

Please phone/text Cool Kids directly with any absences on 027 931 1311.

An additional charge will be made for late pick up from the programme of \$1.50 for each 1 minute, or part thereof, that your child and our staff are kept waiting after the advertised end of the programme.

Invoices for care will be emailed weekly in arrears.

Payment may be made by eftpos, credit card, cheque, cash, or by automatic payment or internet banking to 12-3095-0158890-57. Please use your child's surname in particulars and invoice number. Please make cheques payable to Warkworth Primary School.

Discount Available

A 10% discount applies for four days booked and attended in the same week, per child per week.

A 10% discount applies for 2 children (siblings only) and 20% applies for 3 or more children (siblings only) attending the same day.

Discount is not available to WINZ clients.

Health and Safety

In the event of an accident the parent/caregiver signing the Enrolment Contract authorises programme staff to obtain medical assistance as may be deemed necessary. Should your child need to be transported from the site in an emergency situation, our Transport Policy will be adhered to by staff.

Access arrangements for your child must be detailed on the Enrolment Contract. Please inform the supervisor of any safety or custody issues that may affect your child's wellbeing and security.

CYF Guidelines are followed should an allegation or suspicion of child abuse occur.

Behaviour Management

Where a child or group of children's behaviour threatens the safety and/or enjoyment of the other programme participants or members of the general public, the child or children may be withdrawn from the programme and the responsible parent/caregiver contacted to collect their child from the programme. This procedure is most likely to be initiated where a child repeatedly disrespects the direction given by staff. No refund will be given if a child is withdrawn from the programme for disruptive behaviour.

Personal Property

Staff can take no responsibility for loss or damage to children's personal property.

Acceptance of Terms and Conditions

☐ I have read and understood the Parent Information and Terms and Conditions and agree to abide by them.

Parent/Caregiver Signature

Cool Kids Warkworth

Enrolment Contract - Holiday Programme (4 Weeks)

Please complete all sections and **PRINT** clearly.

1 CHILD DETAILS

FAMILY NAME	<input type="text"/>	Home phone	<input type="text"/>		
Child's Name (1)	<input type="text"/>	Age	<input type="text"/>	Boy	<input type="text"/>
				Girl	<input type="text"/>
Residential Address	<input type="text"/>				
School Attended	<input type="text"/>	Year Level	<input type="text"/>	Ethnicity	<input type="text"/>

2 PLEASE SPECIFY ANY MEDICAL CONDITIONS, OR ALLERGIES YOUR CHILD HAS, INCLUDING ADHD, ANY SPECIAL DIETARY NEEDS AND ANY SPECIAL NEEDS OR CIRCUMSTANCES ABOUT WHICH WE SHOULD BE MADE AWARE.

If your child requires medication administered while attending this programme, you are required to complete a separate MEDICAL CONSENT FORM. Please ask staff on site.

Family Doctor	<input type="text"/>	Phone	<input type="text"/>
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3 PARENT / CAREGIVER 1

Name	<input type="text"/>				
Relationship to child	<input type="text"/>	Home phone	<input type="text"/>		
Email	<input type="text"/>	Business phone	<input type="text"/>		
Residential/Postal Address (if different from child's above)	<input type="text"/>	Mobile	<input type="text"/>		

4 PARENT / CAREGIVER 2

Name	<input type="text"/>				
Relationship to child	<input type="text"/>	Home phone	<input type="text"/>		
Email	<input type="text"/>	Business phone	<input type="text"/>		
Residential/Postal Address (if different from child's above)	<input type="text"/>	Mobile	<input type="text"/>		

5 ALTERNATIVE EMERGENCY CONTACT – This must be provided

Name	<input type="text"/>				
Relationship to child	<input type="text"/>	Phone	<input type="text"/>		

6 AUTHORISED ACCESS - Any changes to this section must be notified in writing to Warkworth School.

Is anyone forbidden by law to have access to the child who is enrolled on this contract? ☐ NO ☐ YES

If YES, please provide a copy of the legal document that supports this claim. Supplied on [date]

7 WHO, OTHER THAN THE PERSON SIGNING THIS FORM, IS AUTHORISED TO PICK UP THIS CHILD FROM THIS PROGRAMME?

Name (1)

Home phone (1)

Relationship to child (1)

Mobile (1)

Name (2)

Home phone (2)

Relationship to child (2)

Mobile (2)

8 ATTENDANCE - Please indicate the days and hours your child will be attending.

Expected Start Date:

		Monday		Tuesday		Wednesday		Thursday		Friday	
Week 1	Holiday Programme										
	Before/After Care	Before	After	Before	After	Before	After	Before	After	Before	After
Week 2	Holiday Programme										
	Before/After Care	Before	After	Before	After	Before	After	Before	After	Before	After
Week 3	Holiday Programme										
	Before/After Care	Before	After	Before	After	Before	After	Before	After	Before	After
Week 4	Holiday Programme					N/A		N/A		N/A	
	Before/After Care	Before	After	Before	After	Before	After	Before	After	Before	After

Please Note: If you have care requirements for times other than the above, please contact the Supervisor directly (027 931 1311) to discuss as flexibility of hours is possible on non-trip days.

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Acceptance of Terms and Conditions

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Parent/Caregiver Signature

Cool Kids Warkworth

Enrolment Contract - Holiday Programme (4 Weeks)

Please complete all sections and **PRINT** clearly.

1 CHILD DETAILS

FAMILY NAME	<input type="text"/>	Home phone	<input type="text"/>		
Child's Name (1)	<input type="text"/>	Age	<input type="text"/>	Boy	<input type="text"/>
				Girl	<input type="text"/>
Residential Address	<input type="text"/>				
School Attended	<input type="text"/>	Year Level	<input type="text"/>	Ethnicity	<input type="text"/>

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Family Doctor	<input type="text"/>	Phone	<input type="text"/>
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3 PARENT / CAREGIVER 1

Name	<input type="text"/>			
Relationship to child	<input type="text"/>	Home phone	<input type="text"/>	
Email	<input type="text"/>	Business phone	<input type="text"/>	
Residential/Postal Address (if different from child's above)	<input type="text"/>	Mobile	<input type="text"/>	

4 PARENT / CAREGIVER 2

Name	<input type="text"/>			
Relationship to child	<input type="text"/>	Home phone	<input type="text"/>	
Email	<input type="text"/>	Business phone	<input type="text"/>	
Residential/Postal Address (if different from child's above)	<input type="text"/>	Mobile	<input type="text"/>	

5 ALTERNATIVE EMERGENCY CONTACT – This must be provided

Name	<input type="text"/>		
Relationship to child	<input type="text"/>	Phone	<input type="text"/>

6 AUTHORISED ACCESS - Any changes to this section must be notified in writing to Warkworth School.

Is anyone forbidden by law to have access to the child who is enrolled on this contract? ☐ NO ☐ YES

If YES, please provide a copy of the legal document that supports this claim. Supplied on [date]

7 WHO, OTHER THAN THE PERSON SIGNING THIS FORM, IS AUTHORISED TO PICK UP THIS CHILD FROM THIS PROGRAMME?

Name (1)

Home phone (1)

Relationship to child (1)

Mobile (1)

Name (2)

Home phone (2)

Relationship to child (2)

Mobile (2)

8 ATTENDANCE - Please indicate the days and hours your child will be attending.

Expected Start Date:

		Monday		Tuesday		Wednesday		Thursday		Friday	
Week 1	Holiday Programme										
	Before/After Care	Before	After	Before	After	Before	After	Before	After	Before	After
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	Before/After Care	Before	After	Before	After	Before	After	Before	After	Before	After
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	Before/After Care	Before	After	Before	After	Before	After	Before	After	Before	After

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Parent/Caregiver Signature

Cool Kids Warkworth

Enrolment Contract - Holiday Programme (4 Weeks)

Please complete all sections and **PRINT** clearly.

1 CHILD DETAILS

FAMILY NAME	<input type="text"/>	Home phone	<input type="text"/>		
Child's Name (1)	<input type="text"/>	Age	<input type="text"/>	Boy	<input type="text"/>
				Girl	<input type="text"/>
Residential Address	<input type="text"/>				
School Attended	<input type="text"/>	Year Level	<input type="text"/>	Ethnicity	<input type="text"/>

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3 PARENT / CAREGIVER 1

Name	<input type="text"/>				
Relationship to child	<input type="text"/>	Home phone	<input type="text"/>		
Email	<input type="text"/>	Business phone	<input type="text"/>		
Residential/Postal Address (if different from child's above)	<input type="text"/>	Mobile	<input type="text"/>		

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Name	<input type="text"/>				
Relationship to child	<input type="text"/>	Home phone	<input type="text"/>		
Email	<input type="text"/>	Business phone	<input type="text"/>		
Residential/Postal Address (if different from child's above)	<input type="text"/>	Mobile	<input type="text"/>		

5 ALTERNATIVE EMERGENCY CONTACT – This must be provided

Name	<input type="text"/>				
Relationship to child	<input type="text"/>	Phone	<input type="text"/>		

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Is anyone forbidden by law to have access to the child who is enrolled on this contract? ☐ NO ☐ YES

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Name (1)	<input type="text"/>	Home phone (1)	<input type="text"/>
Relationship to child (1)	<input type="text"/>	Mobile (1)	<input type="text"/>
Name (2)	<input type="text"/>	Home phone (2)	<input type="text"/>
Relationship to child (2)	<input type="text"/>	Mobile (2)	<input type="text"/>

8 ATTENDANCE - Please indicate the days and hours your child will be attending.

Expected Start Date:

		Monday		Tuesday		Wednesday		Thursday		Friday	
Week 1	Holiday Programme										
	Before/After Care	Before	After	Before	After	Before	After	Before	After	Before	After
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Children enrolled in After Care will receive a light snack and drink for afternoon tea. This may include seasonal fruit, sandwiches, biscuits and occasionally scones and baking, made as part of the programme.

Please advise if there is any food your child is not allowed.

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- ☐ I understand that any unpaid amount older than one month from date of invoice, will be sent to Debt Collection for recovery and any cost incurred in that recovery will be paid by myself.

Parent/Caregiver Initials: _____

Cool Kids

Terms and Conditions - Holiday Programme

Parent Responsibilities

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Please notify us if your child is unwell and unable to attend, or if someone other than those named on the Enrolment Contract will be picking your child up.

The parent/caregiver signing the Enrolment Contract gives permission for their child to be photographed by staff. Any such photographs will only be used by Cool Kids Warkworth for promotional purposes.

Fees and Payments

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Please phone/text Cool Kids directly with any absences on 027 931 1311.

An additional charge will be made for late pick up from the programme of \$1.50 for each 1 minute, or part thereof, that your child and our staff are kept waiting after the advertised end of the programme.

Invoices for care will be emailed weekly in arrears.

Payment may be made by eftpos, credit card, cheque, cash, or by automatic payment or internet banking to 12-3095-0158890-57. Please use your child's surname in particulars and invoice number. Please make cheques payable to Warkworth Primary School.

Discount Available

A 10% discount applies for four days booked and attended in the same week, per child per week.

A 10% discount applies for 2 children (siblings only) and 20% applies for 3 or more children (siblings only) attending the same day.

Discount is not available to WINZ clients.

Health and Safety

In the event of an accident the parent/caregiver signing the Enrolment Contract authorises programme staff to obtain medical assistance as may be deemed necessary. Should your child need to be transported from the site in an emergency situation, our Transport Policy will be adhered to by staff.

Access arrangements for your child must be detailed on the Enrolment Contract. Please inform the supervisor of any safety or custody issues that may affect your child's wellbeing and security.

CYF Guidelines are followed should an allegation or suspicion of child abuse occur.

Behaviour Management

Where a child or group of children's behaviour threatens the safety and/or enjoyment of the other programme participants or members of the general public, the child or children may be withdrawn from the programme and the responsible parent/caregiver contacted to collect their child from the programme. This procedure is most likely to be initiated where a child repeatedly disrespects the direction given by staff. No refund will be given if a child is withdrawn from the programme for disruptive behaviour.

Personal Property

Staff can take no responsibility for loss or damage to children's personal property.

Acceptance of Terms and Conditions

☐ I have read and understood the Parent Information and Terms and Conditions and agree to abide by them.

Parent/Caregiver Signature

Cool Kids Warkworth

Enrolment Contract - Holiday Programme (4 Weeks)

Please complete all sections and **PRINT** clearly.

1 CHILD DETAILS

FAMILY NAME	<input type="text"/>	Home phone	<input type="text"/>		
Child's Name (1)	<input type="text"/>	Age	<input type="text"/>	Boy	<input type="text"/>
				Girl	<input type="text"/>
Residential Address	<input type="text"/>				
School Attended	<input type="text"/>	Year Level	<input type="text"/>	Ethnicity	<input type="text"/>

2 PLEASE SPECIFY ANY MEDICAL CONDITIONS, OR ALLERGIES YOUR CHILD HAS, INCLUDING ADHD, ANY SPECIAL DIETARY NEEDS AND ANY SPECIAL NEEDS OR CIRCUMSTANCES ABOUT WHICH WE SHOULD BE MADE AWARE.

If your child requires medication administered while attending this programme, you are required to complete a separate MEDICAL CONSENT FORM. Please ask staff on site.

Family Doctor	<input type="text"/>	Phone	<input type="text"/>
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3 PARENT / CAREGIVER 1

Name	<input type="text"/>			
Relationship to child	<input type="text"/>	Home phone	<input type="text"/>	
Email	<input type="text"/>	Business phone	<input type="text"/>	
Residential/Postal Address (if different from child's above)	<input type="text"/>	Mobile	<input type="text"/>	

4 PARENT / CAREGIVER 2

Name	<input type="text"/>			
Relationship to child	<input type="text"/>	Home phone	<input type="text"/>	
Email	<input type="text"/>	Business phone	<input type="text"/>	
Residential/Postal Address (if different from child's above)	<input type="text"/>	Mobile	<input type="text"/>	

5 ALTERNATIVE EMERGENCY CONTACT – This must be provided

Name	<input type="text"/>		
Relationship to child	<input type="text"/>	Phone	<input type="text"/>

6 AUTHORISED ACCESS - Any changes to this section must be notified in writing to Warkworth School.

Is anyone forbidden by law to have access to the child who is enrolled on this contract? ☐ NO ☐ YES

If YES, please provide a copy of the legal document that supports this claim. Supplied on [date]

7 WHO, OTHER THAN THE PERSON SIGNING THIS FORM, IS AUTHORISED TO PICK UP THIS CHILD FROM THIS PROGRAMME?

Name (1)

Home phone (1)

Relationship to child (1)

Mobile (1)

Name (2)

Home phone (2)

Relationship to child (2)

Mobile (2)

8 ATTENDANCE - Please indicate the days and hours your child will be attending.

Expected Start Date:

		Monday		Tuesday		Wednesday		Thursday		Friday	
Week 1	Holiday Programme										
	Before/After Care	Before	After	Before	After	Before	After	Before	After	Before	After
Week 2	Holiday Programme										
	Before/After Care	Before	After	Before	After	Before	After	Before	After	Before	After
Week 3	Holiday Programme										
	Before/After Care	Before	After	Before	After	Before	After	Before	After	Before	After
Week 4	Holiday Programme					N/A		N/A		N/A	
	Before/After Care	Before	After	Before	After	Before	After	Before	After	Before	After

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Acceptance of Terms and Conditions

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Parent/Caregiver Signature

Cool Kids Warkworth

Enrolment Contract - Holiday Programme (4 Weeks)

Please complete all sections and **PRINT** clearly.

1 CHILD DETAILS

FAMILY NAME	<input type="text"/>	Home phone	<input type="text"/>		
Child's Name (1)	<input type="text"/>	Age	<input type="text"/>	Boy	<input type="text"/>
				Girl	<input type="text"/>
Residential Address	<input type="text"/>				
School Attended	<input type="text"/>	Year Level	<input type="text"/>	Ethnicity	<input type="text"/>

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3 PARENT / CAREGIVER 1

Name	<input type="text"/>			
Relationship to child	<input type="text"/>	Home phone	<input type="text"/>	
Email	<input type="text"/>	Business phone	<input type="text"/>	
Residential/Postal Address (if different from child's above)	<input type="text"/>	Mobile	<input type="text"/>	

4 PARENT / CAREGIVER 2

Name	<input type="text"/>			
Relationship to child	<input type="text"/>	Home phone	<input type="text"/>	
Email	<input type="text"/>	Business phone	<input type="text"/>	
Residential/Postal Address (if different from child's above)	<input type="text"/>	Mobile	<input type="text"/>	

5 ALTERNATIVE EMERGENCY CONTACT – This must be provided

Name	<input type="text"/>		
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Mobile (1)

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Home phone (2)

Relationship to child (2)

Mobile (2)

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Parent/Caregiver Signature

Cool Kids Warkworth

Enrolment Contract - Holiday Programme (4 Weeks)

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Child's Name (1)	<input type="text"/>	Age	<input type="text"/>	Boy	<input type="text"/>
				Girl	<input type="text"/>
Residential Address	<input type="text"/>				
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Name	<input type="text"/>				
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Email	<input type="text"/>	Business phone	<input type="text"/>		
Residential/Postal Address (if different from child's above)	<input type="text"/>	Mobile	<input type="text"/>		

4 PARENT / CAREGIVER 2

Name	<input type="text"/>				
Relationship to child	<input type="text"/>	Home phone	<input type="text"/>		
Email	<input type="text"/>	Business phone	<input type="text"/>		
Residential/Postal Address (if different from child's above)	<input type="text"/>	Mobile	<input type="text"/>		

5 ALTERNATIVE EMERGENCY CONTACT – This must be provided

Name	<input type="text"/>				
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Name (1)

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		Monday		Tuesday		Wednesday		Thursday		Friday	
Week 1	Holiday Programme										
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- ☐ I understand that weekly invoices thereafter must be paid within **seven (7) days** of receipt of invoice.
- ☐ I understand that any unpaid amount older than one month from date of invoice, will be sent to Debt Collection for recovery and any cost incurred in that recovery will be paid by myself.

Parent/Caregiver Initials: _____

Cool Kids

Terms and Conditions - Holiday Programme

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Please notify us if your child is unwell and unable to attend, or if someone other than those named on the Enrolment Contract will be picking your child up.

The parent/caregiver signing the Enrolment Contract gives permission for their child to be photographed by staff. Any such photographs will only be used by Cool Kids Warkworth for promotional purposes.

Fees and Payments

For all Holiday Programmes, **an Enrolment Contract and 50% deposit of fees will be required to secure a place.** Once a booking has been made, **any cancellation** must be in writing, **FIVE working days** in advance, otherwise **full payment** is required.

Please phone/text Cool Kids directly with any absences on 027 931 1311.

An additional charge will be made for late pick up from the programme of \$1.50 for each 1 minute, or part thereof, that your child and our staff are kept waiting after the advertised end of the programme.

Invoices for care will be emailed weekly in arrears.

Payment may be made by eftpos, credit card, cheque, cash, or by automatic payment or internet banking to 12-3095-0158890-57. Please use your child's surname in particulars and invoice number. Please make cheques payable to Warkworth Primary School.

Discount Available

A 10% discount applies for four days booked and attended in the same week, per child per week.

A 10% discount applies for 2 children (siblings only) and 20% applies for 3 or more children (siblings only) attending the same day.

Discount is not available to WINZ clients.

Health and Safety

In the event of an accident the parent/caregiver signing the Enrolment Contract authorises programme staff to obtain medical assistance as may be deemed necessary. Should your child need to be transported from the site in an emergency situation, our Transport Policy will be adhered to by staff.

Access arrangements for your child must be detailed on the Enrolment Contract. Please inform the supervisor of any safety or custody issues that may affect your child's wellbeing and security.

CYF Guidelines are followed should an allegation or suspicion of child abuse occur.

Behaviour Management

Where a child or group of children's behaviour threatens the safety and/or enjoyment of the other programme participants or members of the general public, the child or children may be withdrawn from the programme and the responsible parent/caregiver contacted to collect their child from the programme. This procedure is most likely to be initiated where a child repeatedly disrespects the direction given by staff. No refund will be given if a child is withdrawn from the programme for disruptive behaviour.

Personal Property

Staff can take no responsibility for loss or damage to children's personal property.

Acceptance of Terms and Conditions

☐ I have read and understood the Parent Information and Terms and Conditions and agree to abide by them.

Parent/Caregiver Signature

Cool Kids Warkworth

Enrolment Contract - Holiday Programme (4 Weeks)

Please complete all sections and **PRINT** clearly.

1 CHILD DETAILS

FAMILY NAME	<input type="text"/>	Home phone	<input type="text"/>		
Child's Name (1)	<input type="text"/>	Age	<input type="text"/>	Boy	<input type="text"/>
				Girl	<input type="text"/>
Residential Address	<input type="text"/>				
School Attended	<input type="text"/>	Year Level	<input type="text"/>	Ethnicity	<input type="text"/>

2 PLEASE SPECIFY ANY MEDICAL CONDITIONS, OR ALLERGIES YOUR CHILD HAS, INCLUDING ADHD, ANY SPECIAL DIETARY NEEDS AND ANY SPECIAL NEEDS OR CIRCUMSTANCES ABOUT WHICH WE SHOULD BE MADE AWARE.

If your child requires medication administered while attending this programme, you are required to complete a separate **MEDICAL CONSENT FORM**. Please ask staff on site.

Family Doctor	<input type="text"/>	Phone	<input type="text"/>
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3 PARENT / CAREGIVER 1

Name	<input type="text"/>			
Relationship to child	<input type="text"/>	Home phone	<input type="text"/>	
Email	<input type="text"/>	Business phone	<input type="text"/>	
Residential/Postal Address (if different from child's above)	<input type="text"/>	Mobile	<input type="text"/>	

4 PARENT / CAREGIVER 2

Name	<input type="text"/>			
Relationship to child	<input type="text"/>	Home phone	<input type="text"/>	
Email	<input type="text"/>	Business phone	<input type="text"/>	
Residential/Postal Address (if different from child's above)	<input type="text"/>	Mobile	<input type="text"/>	

5 ALTERNATIVE EMERGENCY CONTACT – This must be provided

Name	<input type="text"/>		
Relationship to child	<input type="text"/>	Phone	<input type="text"/>

6 AUTHORISED ACCESS - Any changes to this section must be notified in writing to Warkworth School.

Is anyone forbidden by law to have access to the child who is enrolled on this contract? ☐ NO ☐ YES

If YES, please provide a copy of the legal document that supports this claim. Supplied on [date]

7 WHO, OTHER THAN THE PERSON SIGNING THIS FORM, IS AUTHORISED TO PICK UP THIS CHILD FROM THIS PROGRAMME?

Name (1)

Home phone (1)

Relationship to child (1)

Mobile (1)

Name (2)

Home phone (2)

Relationship to child (2)

Mobile (2)

8 ATTENDANCE - Please indicate the days and hours your child will be attending.

Expected Start Date:

		Monday		Tuesday		Wednesday		Thursday		Friday	
Week 1	Holiday Programme										
	Before/After Care	Before	After	Before	After	Before	After	Before	After	Before	After
Week 2	Holiday Programme										
	Before/After Care	Before	After	Before	After	Before	After	Before	After	Before	After
Week 3	Holiday Programme										
	Before/After Care	Before	After	Before	After	Before	After	Before	After	Before	After
Week 4	Holiday Programme					N/A		N/A		N/A	
	Before/After Care	Before	After	Before	After	Before	After	Before	After	Before	After

Please Note: If you have care requirements for times other than the above, please contact the Supervisor directly (027 931 1311) to discuss as flexibility of hours is possible on non-trip days.

DISCLAIMER

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- I give permission for my child to be taken to an alternative location (eg civil defence centre) in the event of an emergency situation and for my child to be transported in accordance with the Transport Policy.
- I agree to pay fees as stipulated in the Fees Policy.

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Signature

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Cool Kids

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It is Cool Kids intention to provide a professional service, which will give your child a safe, secure environment and enjoyable care experience.

Afternoon Tea

Children enrolled in After Care will receive a light snack and drink for afternoon tea. This may include seasonal fruit, sandwiches, biscuits and occasionally scones and baking, made as part of the programme.

Please advise if there is any food your child is not allowed.

Collecting Your Child

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Acceptance of Terms and Conditions

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Parent/Caregiver Signature

Cool Kids Warkworth

Enrolment Contract - Holiday Programme (4 Weeks)

Please complete all sections and **PRINT** clearly.

1 CHILD DETAILS

FAMILY NAME	<input type="text"/>	Home phone	<input type="text"/>		
Child's Name (1)	<input type="text"/>	Age	<input type="text"/>	Boy	<input type="text"/>
				Girl	<input type="text"/>
Residential Address	<input type="text"/>				
School Attended	<input type="text"/>	Year Level	<input type="text"/>	Ethnicity	<input type="text"/>

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Family Doctor	<input type="text"/>	Phone	<input type="text"/>
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3 PARENT / CAREGIVER 1

Name	<input type="text"/>			
Relationship to child	<input type="text"/>	Home phone	<input type="text"/>	
Email	<input type="text"/>	Business phone	<input type="text"/>	
Residential/Postal Address (if different from child's above)	<input type="text"/>	Mobile	<input type="text"/>	

4 PARENT / CAREGIVER 2

Name	<input type="text"/>			
Relationship to child	<input type="text"/>	Home phone	<input type="text"/>	
Email	<input type="text"/>	Business phone	<input type="text"/>	
Residential/Postal Address (if different from child's above)	<input type="text"/>	Mobile	<input type="text"/>	

5 ALTERNATIVE EMERGENCY CONTACT – This must be provided

Name	<input type="text"/>		
Relationship to child	<input type="text"/>	Phone	<input type="text"/>

6 AUTHORISED ACCESS - Any changes to this section must be notified in writing to Warkworth School.

Is anyone forbidden by law to have access to the child who is enrolled on this contract? ☐ NO ☐ YES

If YES, please provide a copy of the legal document that supports this claim. Supplied on [date]

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Name (1)

Home phone (1)

Relationship to child (1)

Mobile (1)

Name (2)

Home phone (2)

Relationship to child (2)

Mobile (2)

8 ATTENDANCE - Please indicate the days and hours your child will be attending.

Expected Start Date:

		Monday		Tuesday		Wednesday		Thursday		Friday	
Week 1	Holiday Programme										
	Before/After Care	Before	After	Before	After	Before	After	Before	After	Before	After
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	Before/After Care	Before	After	Before	After	Before	After	Before	After	Before	After
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Cool Kids Warkworth

Enrolment Contract - Holiday Programme (4 Weeks)

Please complete all sections and **PRINT** clearly.

1 CHILD DETAILS

FAMILY NAME	<input type="text"/>	Home phone	<input type="text"/>		
Child's Name (1)	<input type="text"/>	Age	<input type="text"/>	Boy	<input type="text"/>
				Girl	<input type="text"/>
Residential Address	<input type="text"/>				
School Attended	<input type="text"/>	Year Level	<input type="text"/>	Ethnicity	<input type="text"/>

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3 PARENT / CAREGIVER 1

Name	<input type="text"/>			
Relationship to child	<input type="text"/>	Home phone	<input type="text"/>	
Email	<input type="text"/>	Business phone	<input type="text"/>	
Residential/Postal Address (if different from child's above)	<input type="text"/>	Mobile	<input type="text"/>	

4 PARENT / CAREGIVER 2

Name	<input type="text"/>			
Relationship to child	<input type="text"/>	Home phone	<input type="text"/>	
Email	<input type="text"/>	Business phone	<input type="text"/>	
Residential/Postal Address (if different from child's above)	<input type="text"/>	Mobile	<input type="text"/>	

5 ALTERNATIVE EMERGENCY CONTACT – This must be provided

Name	<input type="text"/>		
Relationship to child	<input type="text"/>	Phone	<input type="text"/>

6 AUTHORISED ACCESS - Any changes to this section must be notified in writing to Warkworth School.

Is anyone forbidden by law to have access to the child who is enrolled on this contract? ☐ NO ☐ YES

If YES, please provide a copy of the legal document that supports this claim. Supplied on [date]

7 WHO, OTHER THAN THE PERSON SIGNING THIS FORM, IS AUTHORISED TO PICK UP THIS CHILD FROM THIS PROGRAMME?

Name (1)	<input type="text"/>	Home phone (1)	<input type="text"/>
Relationship to child (1)	<input type="text"/>	Mobile (1)	<input type="text"/>
Name (2)	<input type="text"/>	Home phone (2)	<input type="text"/>
Relationship to child (2)	<input type="text"/>	Mobile (2)	<input type="text"/>

8 ATTENDANCE - Please indicate the days and hours your child will be attending.

Expected Start Date:

		Monday		Tuesday		Wednesday		Thursday		Friday	
Week 1	Holiday Programme										
	Before/After Care	Before	After	Before	After	Before	After	Before	After	Before	After
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Please phone/text Cool Kids directly with any absences on 027 931 1311.

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Invoices for care will be emailed weekly in arrears.

Payment may be made by eftpos, credit card, cheque, cash, or by automatic payment or internet banking to 12-3095-0158890-57. Please use your child's surname in particulars and invoice number. Please make cheques payable to Warkworth Primary School.

Discount Available

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A 10% discount applies for 2 children (siblings only) and 20% applies for 3 or more children (siblings only) attending the same day.

Discount is not available to WINZ clients.

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In the event of an accident the parent/caregiver signing the Enrolment Contract authorises programme staff to obtain medical assistance as may be deemed necessary. Should your child need to be transported from the site in an emergency situation, our Transport Policy will be adhered to by staff.

Access arrangements for your child must be detailed on the Enrolment Contract. Please inform the supervisor of any safety or custody issues that may affect your child's wellbeing and security.

CYF Guidelines are followed should an allegation or suspicion of child abuse occur.

Behaviour Management

Where a child or group of children's behaviour threatens the safety and/or enjoyment of the other programme participants or members of the general public, the child or children may be withdrawn from the programme and the responsible parent/caregiver contacted to collect their child from the programme. This procedure is most likely to be initiated where a child repeatedly disrespects the direction given by staff. No refund will be given if a child is withdrawn from the programme for disruptive behaviour.

Personal Property

Staff can take no responsibility for loss or damage to children's personal property.

Acceptance of Terms and Conditions

☐ I have read and understood the Parent Information and Terms and Conditions and agree to abide by them.

Parent/Caregiver Signature

Cool Kids Warkworth

Enrolment Contract - Holiday Programme (4 Weeks)

Please complete all sections and **PRINT** clearly.

1 CHILD DETAILS

FAMILY NAME	<input type="text"/>	Home phone	<input type="text"/>		
Child's Name (1)	<input type="text"/>	Age	<input type="text"/>	Boy	<input type="text"/>
				Girl	<input type="text"/>
Residential Address	<input type="text"/>				
School Attended	<input type="text"/>	Year Level	<input type="text"/>	Ethnicity	<input type="text"/>

2 PLEASE SPECIFY ANY MEDICAL CONDITIONS, OR ALLERGIES YOUR CHILD HAS, INCLUDING ADHD, ANY SPECIAL DIETARY NEEDS AND ANY SPECIAL NEEDS OR CIRCUMSTANCES ABOUT WHICH WE SHOULD BE MADE AWARE.

If your child requires medication administered while attending this programme, you are required to complete a separate MEDICAL CONSENT FORM. Please ask staff on site.

Family Doctor	<input type="text"/>	Phone	<input type="text"/>
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3 PARENT / CAREGIVER 1

Name	<input type="text"/>			
Relationship to child	<input type="text"/>	Home phone	<input type="text"/>	
Email	<input type="text"/>	Business phone	<input type="text"/>	
Residential/Postal Address (if different from child's above)	<input type="text"/>	Mobile	<input type="text"/>	

4 PARENT / CAREGIVER 2

Name	<input type="text"/>			
Relationship to child	<input type="text"/>	Home phone	<input type="text"/>	
Email	<input type="text"/>	Business phone	<input type="text"/>	
Residential/Postal Address (if different from child's above)	<input type="text"/>	Mobile	<input type="text"/>	

5 ALTERNATIVE EMERGENCY CONTACT – This must be provided

Name	<input type="text"/>		
Relationship to child	<input type="text"/>	Phone	<input type="text"/>

6 AUTHORISED ACCESS - Any changes to this section must be notified in writing to Warkworth School.

Is anyone forbidden by law to have access to the child who is enrolled on this contract? ☐ NO ☐ YES

If YES, please provide a copy of the legal document that supports this claim. Supplied on [date]

7 WHO, OTHER THAN THE PERSON SIGNING THIS FORM, IS AUTHORISED TO PICK UP THIS CHILD FROM THIS PROGRAMME?

Name (1)

Home phone (1)

Relationship to child (1)

Mobile (1)

Name (2)

Home phone (2)

Relationship to child (2)

Mobile (2)

8 ATTENDANCE - Please indicate the days and hours your child will be attending.

Expected Start Date:

		Monday		Tuesday		Wednesday		Thursday		Friday	
Week 1	Holiday Programme										
	Before/After Care	Before	After	Before	After	Before	After	Before	After	Before	After
Week 2	Holiday Programme										
	Before/After Care	Before	After	Before	After	Before	After	Before	After	Before	After
Week 3	Holiday Programme										
	Before/After Care	Before	After	Before	After	Before	After	Before	After	Before	After
Week 4	Holiday Programme					N/A		N/A		N/A	
	Before/After Care	Before	After	Before	After	Before	After	Before	After	Before	After

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- I give permission for my child to be taken to an alternative location (eg civil defence centre) in the event of an emergency situation and for my child to be transported in accordance with the Transport Policy.
- I agree to pay fees as stipulated in the Fees Policy.

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Name

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Afternoon Tea

Children enrolled in After Care will receive a light snack and drink for afternoon tea. This may include seasonal fruit, sandwiches, biscuits and occasionally scones and baking, made as part of the programme.

Please advise if there is any food your child is not allowed.

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Cool Kids

Terms and Conditions - Holiday Programme

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Parent/Caregiver Signature

Cool Kids Warkworth

Enrolment Contract - Holiday Programme (4 Weeks)

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1 CHILD DETAILS

FAMILY NAME	<input type="text"/>	Home phone	<input type="text"/>		
Child's Name (1)	<input type="text"/>	Age	<input type="text"/>	Boy	<input type="text"/>
				Girl	<input type="text"/>
Residential Address	<input type="text"/>				
School Attended	<input type="text"/>	Year Level	<input type="text"/>	Ethnicity	<input type="text"/>

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3 PARENT / CAREGIVER 1

Name	<input type="text"/>			
Relationship to child	<input type="text"/>	Home phone	<input type="text"/>	
Email	<input type="text"/>	Business phone	<input type="text"/>	
Residential/Postal Address (if different from child's above)	<input type="text"/>	Mobile	<input type="text"/>	

4 PARENT / CAREGIVER 2

Name	<input type="text"/>			
Relationship to child	<input type="text"/>	Home phone	<input type="text"/>	
Email	<input type="text"/>	Business phone	<input type="text"/>	
Residential/Postal Address (if different from child's above)	<input type="text"/>	Mobile	<input type="text"/>	

5 ALTERNATIVE EMERGENCY CONTACT – This must be provided

Name	<input type="text"/>		
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Name (1)

Home phone (1)

Relationship to child (1)

Mobile (1)

Name (2)

Home phone (2)

Relationship to child (2)

Mobile (2)

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	Before/After Care	Before	After	Before	After	Before	After	Before	After	Before	After
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Parent/Caregiver Signature

Cool Kids Warkworth

Enrolment Contract - Holiday Programme (4 Weeks)

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1 CHILD DETAILS

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Child's Name (1)	<input type="text"/>	Age	<input type="text"/>	Boy	<input type="text"/>
				Girl	<input type="text"/>
Residential Address	<input type="text"/>				
School Attended	<input type="text"/>	Year Level	<input type="text"/>	Ethnicity	<input type="text"/>

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Name	<input type="text"/>			
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Email	<input type="text"/>	Business phone	<input type="text"/>	
Residential/Postal Address (if different from child's above)	<input type="text"/>	Mobile	<input type="text"/>	

4 PARENT / CAREGIVER 2

Name	<input type="text"/>			
Relationship to child	<input type="text"/>	Home phone	<input type="text"/>	
Email	<input type="text"/>	Business phone	<input type="text"/>	
Residential/Postal Address (if different from child's above)	<input type="text"/>	Mobile	<input type="text"/>	

5 ALTERNATIVE EMERGENCY CONTACT – This must be provided

Name	<input type="text"/>		
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6 AUTHORISED ACCESS - Any changes to this section must be notified in writing to Warkworth School.

Is anyone forbidden by law to have access to the child who is enrolled on this contract? ☐ NO ☐ YES

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Name (1)

Home phone (1)

Relationship to child (1)

Mobile (1)

Name (2)

Home phone (2)

Relationship to child (2)

Mobile (2)

8 ATTENDANCE - Please indicate the days and hours your child will be attending.

Expected Start Date:

		Monday		Tuesday		Wednesday		Thursday		Friday	
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Invoices for care will be emailed weekly in arrears.

Payment may be made by eftpos, credit card, cheque, cash, or by automatic payment or internet banking to 12-3095-0158890-57. Please use your child's surname in particulars and invoice number. Please make cheques payable to Warkworth Primary School.

Discount Available

A 10% discount applies for four days booked and attended in the same week, per child per week.

A 10% discount applies for 2 children (siblings only) and 20% applies for 3 or more children (siblings only) attending the same day.

Discount is not available to WINZ clients.

Health and Safety

In the event of an accident the parent/caregiver signing the Enrolment Contract authorises programme staff to obtain medical assistance as may be deemed necessary. Should your child need to be transported from the site in an emergency situation, our Transport Policy will be adhered to by staff.

Access arrangements for your child must be detailed on the Enrolment Contract. Please inform the supervisor of any safety or custody issues that may affect your child's wellbeing and security.

CYF Guidelines are followed should an allegation or suspicion of child abuse occur.

Behaviour Management

Where a child or group of children's behaviour threatens the safety and/or enjoyment of the other programme participants or members of the general public, the child or children may be withdrawn from the programme and the responsible parent/caregiver contacted to collect their child from the programme. This procedure is most likely to be initiated where a child repeatedly disrespects the direction given by staff. No refund will be given if a child is withdrawn from the programme for disruptive behaviour.

Personal Property

Staff can take no responsibility for loss or damage to children's personal property.

Acceptance of Terms and Conditions

☐ I have read and understood the Parent Information and Terms and Conditions and agree to abide by them.

Parent/Caregiver Signature

Cool Kids Warkworth

Enrolment Contract - Holiday Programme (4 Weeks)

Please complete all sections and **PRINT** clearly.

1 CHILD DETAILS

FAMILY NAME	<input type="text"/>	Home phone	<input type="text"/>		
Child's Name (1)	<input type="text"/>	Age	<input type="text"/>	Boy	<input type="text"/>
				Girl	<input type="text"/>
Residential Address	<input type="text"/>				
School Attended	<input type="text"/>	Year Level	<input type="text"/>	Ethnicity	<input type="text"/>

2 PLEASE SPECIFY ANY MEDICAL CONDITIONS, OR ALLERGIES YOUR CHILD HAS, INCLUDING ADHD, ANY SPECIAL DIETARY NEEDS AND ANY SPECIAL NEEDS OR CIRCUMSTANCES ABOUT WHICH WE SHOULD BE MADE AWARE.

If your child requires medication administered while attending this programme, you are required to complete a separate MEDICAL CONSENT FORM. Please ask staff on site.

Family Doctor	<input type="text"/>	Phone	<input type="text"/>
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3 PARENT / CAREGIVER 1

Name	<input type="text"/>			
Relationship to child	<input type="text"/>	Home phone	<input type="text"/>	
Email	<input type="text"/>	Business phone	<input type="text"/>	
Residential/Postal Address (if different from child's above)	<input type="text"/>	Mobile	<input type="text"/>	

4 PARENT / CAREGIVER 2

Name	<input type="text"/>			
Relationship to child	<input type="text"/>	Home phone	<input type="text"/>	
Email	<input type="text"/>	Business phone	<input type="text"/>	
Residential/Postal Address (if different from child's above)	<input type="text"/>	Mobile	<input type="text"/>	

5 ALTERNATIVE EMERGENCY CONTACT – This must be provided

Name	<input type="text"/>		
Relationship to child	<input type="text"/>	Phone	<input type="text"/>

6 AUTHORISED ACCESS - Any changes to this section must be notified in writing to Warkworth School.

Is anyone forbidden by law to have access to the child who is enrolled on this contract? ☐ NO ☐ YES

If YES, please provide a copy of the legal document that supports this claim. Supplied on [date]

7 WHO, OTHER THAN THE PERSON SIGNING THIS FORM, IS AUTHORISED TO PICK UP THIS CHILD FROM THIS PROGRAMME?

Name (1)	<input type="text"/>	Home phone (1)	<input type="text"/>
Relationship to child (1)	<input type="text"/>	Mobile (1)	<input type="text"/>
Name (2)	<input type="text"/>	Home phone (2)	<input type="text"/>
Relationship to child (2)	<input type="text"/>	Mobile (2)	<input type="text"/>

8 ATTENDANCE - Please indicate the days and hours your child will be attending.

Expected Start Date:

		Monday		Tuesday		Wednesday		Thursday		Friday	
Week 1	Holiday Programme										
	Before/After Care	Before	After	Before	After	Before	After	Before	After	Before	After
Week 2	Holiday Programme										
	Before/After Care	Before	After	Before	After	Before	After	Before	After	Before	After
Week 3	Holiday Programme										
	Before/After Care	Before	After	Before	After	Before	After	Before	After	Before	After
Week 4	Holiday Programme					N/A		N/A		N/A	
	Before/After Care	Before	After	Before	After	Before	After	Before	After	Before	After

Please Note: If you have care requirements for times other than the above, please contact the Supervisor directly (027 931 1311) to discuss as flexibility of hours is possible on non-trip days.

DISCLAIMER

- I have read the parent information and agree to abide by the Terms and Conditions of 'Cool Kids' Warkworth OSCAR programme. Any changes to the Terms and Conditions will be notified to me.
- I acknowledge that Cool Kids Warkworth management or staff will not be liable for any loss or damage arising (by way of accident, injury, theft or otherwise) out of attendance at the Cool Kids.
- I accept responsibility for any expenses incurred in obtaining treatment for my child in an emergency situation.
- I give permission for my child to be taken to an alternative location (eg civil defence centre) in the event of an emergency situation and for my child to be transported in accordance with the Transport Policy.
- I agree to pay fees as stipulated in the Fees Policy.

PRIVACY ACT

Information collected will be used for the purpose of establishing and maintaining accurate records held by Cool Kids Warkworth. Children's individual files will be available for perusal by parents / caregivers with authorised access. (All personal information will be destroyed at the completion of your child's time in the programme.)

Name	<input type="text"/>
Signature	<input type="text"/>
Date	<input type="text"/>

Cool Kids

Parent Information – Holiday Programme

Cool Kids Before & After Care Programme has been established to provide quality care for children attending our holiday programme.

It operates from the Senior Area Hall between the hours of 7:30 – 9.00am and 3:00 - 6:00pm, Monday to Friday at a cost of \$7.50 per hour.

The completion of an enrolment form is necessary before a child can enter the programme.

It is Cool Kids intention to provide a professional service, which will give your child a safe, secure environment and enjoyable care experience.

Afternoon Tea

Children enrolled in After Care will receive a light snack and drink for afternoon tea. This may include seasonal fruit, sandwiches, biscuits and occasionally scones and baking, made as part of the programme.

Please advise if there is any food your child is not allowed.

Collecting Your Child

When arriving to collect your child please sign them out on the Attendance Sheet with the exact time, and advise the Programme Supervisor you are taking your child.

Complaints

The programme has a complaints procedure. If you have any problems, please approach the Supervisor who will be happy to assist you with your concerns.

Supervision Ratios

The programme will operate on a ratio of 1:10, as recommended by MSD. There will be an appropriate number of staff on duty, with a minimum of 2 staff on at all times.

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PAYMENT SECTION

- ☐ I understand that 50% of Holiday Programme fees is required in advance on enrolment.
- ☐ I understand that weekly invoices thereafter must be paid within **seven (7) days** of receipt of invoice.
- ☐ I understand that any unpaid amount older than one month from date of invoice, will be sent to Debt Collection for recovery and any cost incurred in that recovery will be paid by myself.

Parent/Caregiver Initials: _____

Cool Kids

Terms and Conditions - Holiday Programme

Parent Responsibilities

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Please retain these Terms and Conditions for your reference. A copy of the completed and signed Enrolment Contract is available upon request.

Enrolment

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Enrolment will be on a first come, first served bases. Your child's place is not guaranteed in our programme unless you have received confirmation from the Programme Supervisor.

Please notify us if your child is unwell and unable to attend, or if someone other than those named on the Enrolment Contract will be picking your child up.

The parent/caregiver signing the Enrolment Contract gives permission for their child to be photographed by staff. Any such photographs will only be used by Cool Kids Warkworth for promotional purposes.

Fees and Payments

For all Holiday Programmes, **an Enrolment Contract and 50% deposit of fees will be required to secure a place.** Once a booking has been made, **any cancellation** must be in writing, **FIVE working days** in advance, otherwise **full payment** is required.

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Parent/Caregiver Signature

Cool Kids Warkworth

Enrolment Contract - Holiday Programme (4 Weeks)

Please complete all sections and **PRINT** clearly.

1 CHILD DETAILS

FAMILY NAME	<input type="text"/>	Home phone	<input type="text"/>		
Child's Name (1)	<input type="text"/>	Age	<input type="text"/>	Boy	<input type="text"/>
				Girl	<input type="text"/>
Residential Address	<input type="text"/>				
School Attended	<input type="text"/>	Year Level	<input type="text"/>	Ethnicity	<input type="text"/>

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Family Doctor	<input type="text"/>	Phone	<input type="text"/>
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3 PARENT / CAREGIVER 1

Name	<input type="text"/>			
Relationship to child	<input type="text"/>	Home phone	<input type="text"/>	
Email	<input type="text"/>	Business phone	<input type="text"/>	
Residential/Postal Address (if different from child's above)	<input type="text"/>	Mobile	<input type="text"/>	

4 PARENT / CAREGIVER 2

Name	<input type="text"/>			
Relationship to child	<input type="text"/>	Home phone	<input type="text"/>	
Email	<input type="text"/>	Business phone	<input type="text"/>	
Residential/Postal Address (if different from child's above)	<input type="text"/>	Mobile	<input type="text"/>	

5 ALTERNATIVE EMERGENCY CONTACT – This must be provided

Name	<input type="text"/>		
Relationship to child	<input type="text"/>	Phone	<input type="text"/>

6 AUTHORISED ACCESS - Any changes to this section must be notified in writing to Warkworth School.

Is anyone forbidden by law to have access to the child who is enrolled on this contract? ☐ NO ☐ YES

If YES, please provide a copy of the legal document that supports this claim. Supplied on [date]

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Name (1)

Home phone (1)

Relationship to child (1)

Mobile (1)

Name (2)

Home phone (2)

Relationship to child (2)

Mobile (2)

8 ATTENDANCE - Please indicate the days and hours your child will be attending.

Expected Start Date:

		Monday		Tuesday		Wednesday		Thursday		Friday	
Week 1	Holiday Programme										
	Before/After Care	Before	After	Before	After	Before	After	Before	After	Before	After
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	Before/After Care	Before	After	Before	After	Before	After	Before	After	Before	After
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	Before/After Care	Before	After	Before	After	Before	After	Before	After	Before	After
Week 4	Holiday Programme					N/A		N/A		N/A	
	Before/After Care	Before	After	Before	After	Before	After	Before	After	Before	After

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Acceptance of Terms and Conditions

☐ I have read and understood the Parent Information and Terms and Conditions and agree to abide by them.

Parent/Caregiver Signature

Cool Kids Warkworth

Enrolment Contract - Holiday Programme (4 Weeks)

Please complete all sections and **PRINT** clearly.

1 CHILD DETAILS

FAMILY NAME	<input type="text"/>	Home phone	<input type="text"/>		
Child's Name (1)	<input type="text"/>	Age	<input type="text"/>	Boy	<input type="text"/>
				Girl	<input type="text"/>
Residential Address	<input type="text"/>				
School Attended	<input type="text"/>	Year Level	<input type="text"/>	Ethnicity	<input type="text"/>

2 PLEASE SPECIFY ANY MEDICAL CONDITIONS, OR ALLERGIES YOUR CHILD HAS, INCLUDING ADHD, ANY SPECIAL DIETARY NEEDS AND ANY SPECIAL NEEDS OR CIRCUMSTANCES ABOUT WHICH WE SHOULD BE MADE AWARE.

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3 PARENT / CAREGIVER 1

Name	<input type="text"/>			
Relationship to child	<input type="text"/>	Home phone	<input type="text"/>	
Email	<input type="text"/>	Business phone	<input type="text"/>	
Residential/Postal Address (if different from child's above)	<input type="text"/>	Mobile	<input type="text"/>	

4 PARENT / CAREGIVER 2

Name	<input type="text"/>			
Relationship to child	<input type="text"/>	Home phone	<input type="text"/>	
Email	<input type="text"/>	Business phone	<input type="text"/>	
Residential/Postal Address (if different from child's above)	<input type="text"/>	Mobile	<input type="text"/>	

5 ALTERNATIVE EMERGENCY CONTACT – This must be provided

Name	<input type="text"/>		
Relationship to child	<input type="text"/>	Phone	<input type="text"/>

6 AUTHORISED ACCESS - Any changes to this section must be notified in writing to Warkworth School.

Is anyone forbidden by law to have access to the child who is enrolled on this contract? ☐ NO ☐ YES

If YES, please provide a copy of the legal document that supports this claim. Supplied on [date]

7 WHO, OTHER THAN THE PERSON SIGNING THIS FORM, IS AUTHORISED TO PICK UP THIS CHILD FROM THIS PROGRAMME?

Name (1)

Home phone (1)

Relationship to child (1)

Mobile (1)

Name (2)

Home phone (2)

Relationship to child (2)

Mobile (2)

8 ATTENDANCE - Please indicate the days and hours your child will be attending.

Expected Start Date:

		Monday		Tuesday		Wednesday		Thursday		Friday	
Week 1	Holiday Programme										
	Before/After Care	Before	After	Before	After	Before	After	Before	After	Before	After
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	Before/After Care	Before	After	Before	After	Before	After	Before	After	Before	After

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Health and Safety

In the event of an accident the parent/caregiver signing the Enrolment Contract authorises programme staff to obtain medical assistance as may be deemed necessary. Should your child need to be transported from the site in an emergency situation, our Transport Policy will be adhered to by staff.

Access arrangements for your child must be detailed on the Enrolment Contract. Please inform the supervisor of any safety or custody issues that may affect your child's wellbeing and security.

CYF Guidelines are followed should an allegation or suspicion of child abuse occur.

Behaviour Management

Where a child or group of children's behaviour threatens the safety and/or enjoyment of the other programme participants or members of the general public, the child or children may be withdrawn from the programme and the responsible parent/caregiver contacted to collect their child from the programme. This procedure is most likely to be initiated where a child repeatedly disrespects the direction given by staff. No refund will be given if a child is withdrawn from the programme for disruptive behaviour.

Personal Property

Staff can take no responsibility for loss or damage to children's personal property.

Acceptance of Terms and Conditions

☐ I have read and understood the Parent Information and Terms and Conditions and agree to abide by them.

Parent/Caregiver Signature

Cool Kids Warkworth

Enrolment Contract - Holiday Programme (4 Weeks)

Please complete all sections and **PRINT** clearly.

1 CHILD DETAILS

FAMILY NAME	<input type="text"/>	Home phone	<input type="text"/>		
Child's Name (1)	<input type="text"/>	Age	<input type="text"/>	Boy	<input type="text"/>
				Girl	<input type="text"/>
Residential Address	<input type="text"/>				
School Attended	<input type="text"/>	Year Level	<input type="text"/>	Ethnicity	<input type="text"/>

2 PLEASE SPECIFY ANY MEDICAL CONDITIONS, OR ALLERGIES YOUR CHILD HAS, INCLUDING ADHD, ANY SPECIAL DIETARY NEEDS AND ANY SPECIAL NEEDS OR CIRCUMSTANCES ABOUT WHICH WE SHOULD BE MADE AWARE.

If your child requires medication administered while attending this programme, you are required to complete a separate MEDICAL CONSENT FORM. Please ask staff on site.

Family Doctor	<input type="text"/>	Phone	<input type="text"/>
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3 PARENT / CAREGIVER 1

Name	<input type="text"/>			
Relationship to child	<input type="text"/>	Home phone	<input type="text"/>	
Email	<input type="text"/>	Business phone	<input type="text"/>	
Residential/Postal Address (if different from child's above)	<input type="text"/>	Mobile	<input type="text"/>	

4 PARENT / CAREGIVER 2

Name	<input type="text"/>			
Relationship to child	<input type="text"/>	Home phone	<input type="text"/>	
Email	<input type="text"/>	Business phone	<input type="text"/>	
Residential/Postal Address (if different from child's above)	<input type="text"/>	Mobile	<input type="text"/>	

5 ALTERNATIVE EMERGENCY CONTACT – This must be provided

Name	<input type="text"/>		
Relationship to child	<input type="text"/>	Phone	<input type="text"/>

6 AUTHORISED ACCESS - Any changes to this section must be notified in writing to Warkworth School.

Is anyone forbidden by law to have access to the child who is enrolled on this contract? ☐ NO ☐ YES

If YES, please provide a copy of the legal document that supports this claim. Supplied on [date]

7 WHO, OTHER THAN THE PERSON SIGNING THIS FORM, IS AUTHORISED TO PICK UP THIS CHILD FROM THIS PROGRAMME?

Name (1)

Home phone (1)

Relationship to child (1)

Mobile (1)

Name (2)

Home phone (2)

Relationship to child (2)

Mobile (2)

8 ATTENDANCE - Please indicate the days and hours your child will be attending.

Expected Start Date:

		Monday		Tuesday		Wednesday		Thursday		Friday	
Week 1	Holiday Programme										
	Before/After Care	Before	After	Before	After	Before	After	Before	After	Before	After
Week 2	Holiday Programme										
	Before/After Care	Before	After	Before	After	Before	After	Before	After	Before	After
Week 3	Holiday Programme										
	Before/After Care	Before	After	Before	After	Before	After	Before	After	Before	After
Week 4	Holiday Programme					N/A		N/A		N/A	
	Before/After Care	Before	After	Before	After	Before	After	Before	After	Before	After

Please Note: If you have care requirements for times other than the above, please contact the Supervisor directly (027 931 1311) to discuss as flexibility of hours is possible on non-trip days.

DISCLAIMER

- I have read the parent information and agree to abide by the Terms and Conditions of 'Cool Kids' Warkworth OSCAR programme. Any changes to the Terms and Conditions will be notified to me.
- I acknowledge that Cool Kids Warkworth management or staff will not be liable for any loss or damage arising (by way of accident, injury, theft or otherwise) out of attendance at the Cool Kids.
- I accept responsibility for any expenses incurred in obtaining treatment for my child in an emergency situation.
- I give permission for my child to be taken to an alternative location (eg civil defence centre) in the event of an emergency situation and for my child to be transported in accordance with the Transport Policy.
- I agree to pay fees as stipulated in the Fees Policy.

PRIVACY ACT

Information collected will be used for the purpose of establishing and maintaining accurate records held by Cool Kids Warkworth. Children's individual files will be available for perusal by parents / caregivers with authorised access. (All personal information will be destroyed at the completion of your child's time in the programme.)

Name

Signature

Date

Cool Kids

Parent Information – Holiday Programme

Cool Kids Before & After Care Programme has been established to provide quality care for children attending our holiday programme.

It operates from the Senior Area Hall between the hours of 7:30 – 9.00am and 3:00 - 6:00pm, Monday to Friday at a cost of \$7.50 per hour.

The completion of an enrolment form is necessary before a child can enter the programme.

It is Cool Kids intention to provide a professional service, which will give your child a safe, secure environment and enjoyable care experience.

Afternoon Tea

Children enrolled in After Care will receive a light snack and drink for afternoon tea. This may include seasonal fruit, sandwiches, biscuits and occasionally scones and baking, made as part of the programme.

Please advise if there is any food your child is not allowed.

Collecting Your Child

When arriving to collect your child please sign them out on the Attendance Sheet with the exact time, and advise the Programme Supervisor you are taking your child.

Complaints

The programme has a complaints procedure. If you have any problems, please approach the Supervisor who will be happy to assist you with your concerns.

Supervision Ratios

The programme will operate on a ratio of 1:10, as recommended by MSD. There will be an appropriate number of staff on duty, with a minimum of 2 staff on at all times.

Subsidy

Cool Kids is a MSD approved OSCAR programme. Some families may be eligible to claim the Work and Income OSCAR subsidy. Please contact Work and Income (0800 559 009) directly to check if you are eligible.

Policies

A full Policies and Procedures manual is available on site at all times. These policies follow the guidelines as recommended by CYF and the Out of School Care Network (OSCAR).

PAYMENT SECTION

- ☐ I understand that 50% of Holiday Programme fees is required in advance on enrolment.
- ☐ I understand that weekly invoices thereafter must be paid within **seven (7) days** of receipt of invoice.
- ☐ I understand that any unpaid amount older than one month from date of invoice, will be sent to Debt Collection for recovery and any cost incurred in that recovery will be paid by myself.

Parent/Caregiver Initials: _____

Cool Kids

Terms and Conditions - Holiday Programme

Parent Responsibilities

Parents or Caregivers are required to SIGN OUT on the attendance sheet with the exact time and advise the supervisor before leaving with their child/children.

Only persons named as authorised to collect your child on the Enrolment Contract will be permitted to leave the site with the child/children. Any deviation from the named authority to collect a child must be advised to programme staff.

Please retain these Terms and Conditions for your reference. A copy of the completed and signed Enrolment Contract is available upon request.

Enrolment

By enrolling your child in Cool Kids, you and Warkworth School make a binding agreement regarding the care of your child. By signing the Enrolment Contract, you acknowledge that you have read and understood our Terms and Conditions and agree to abide by them. An Enrolment Contract must be completed and signed before a child is accepted in the programme.

Enrolment will be on a first come, first served bases. Your child's place is not guaranteed in our programme unless you have received confirmation from the Programme Supervisor.

Please notify us if your child is unwell and unable to attend, or if someone other than those named on the Enrolment Contract will be picking your child up.

The parent/caregiver signing the Enrolment Contract gives permission for their child to be photographed by staff. Any such photographs will only be used by Cool Kids Warkworth for promotional purposes.

Fees and Payments

For all Holiday Programmes, **an Enrolment Contract and 50% deposit of fees will be required to secure a place.** Once a booking has been made, **any cancellation** must be in writing, **FIVE working days** in advance, otherwise **full payment** is required.

Please phone/text Cool Kids directly with any absences on 027 931 1311.

An additional charge will be made for late pick up from the programme of \$1.50 for each 1 minute, or part thereof, that your child and our staff are kept waiting after the advertised end of the programme.

Invoices for care will be emailed weekly in arrears.

Payment may be made by eftpos, credit card, cheque, cash, or by automatic payment or internet banking to 12-3095-0158890-57. Please use your child's surname in particulars and invoice number. Please make cheques payable to Warkworth Primary School.

Discount Available

A 10% discount applies for four days booked and attended in the same week, per child per week.

A 10% discount applies for 2 children (siblings only) and 20% applies for 3 or more children (siblings only) attending the same day.

Discount is not available to WINZ clients.

Health and Safety

In the event of an accident the parent/caregiver signing the Enrolment Contract authorises programme staff to obtain medical assistance as may be deemed necessary. Should your child need to be transported from the site in an emergency situation, our Transport Policy will be adhered to by staff.

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Acceptance of Terms and Conditions

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Parent/Caregiver Signature

Cool Kids Warkworth

Enrolment Contract - Holiday Programme (4 Weeks)

Please complete all sections and **PRINT** clearly.

1 CHILD DETAILS

FAMILY NAME	<input type="text"/>	Home phone	<input type="text"/>		
Child's Name (1)	<input type="text"/>	Age	<input type="text"/>	Boy	<input type="text"/>
				Girl	<input type="text"/>
Residential Address	<input type="text"/>				
School Attended	<input type="text"/>	Year Level	<input type="text"/>	Ethnicity	<input type="text"/>

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Family Doctor	<input type="text"/>	Phone	<input type="text"/>
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3 PARENT / CAREGIVER 1

Name	<input type="text"/>			
Relationship to child	<input type="text"/>	Home phone	<input type="text"/>	
Email	<input type="text"/>	Business phone	<input type="text"/>	
Residential/Postal Address (if different from child's above)	<input type="text"/>	Mobile	<input type="text"/>	

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Name	<input type="text"/>			
Relationship to child	<input type="text"/>	Home phone	<input type="text"/>	
Email	<input type="text"/>	Business phone	<input type="text"/>	
Residential/Postal Address (if different from child's above)	<input type="text"/>	Mobile	<input type="text"/>	

5 ALTERNATIVE EMERGENCY CONTACT – This must be provided

Name	<input type="text"/>		
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Is anyone forbidden by law to have access to the child who is enrolled on this contract? ☐ NO ☐ YES

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Name (1)

Home phone (1)

Relationship to child (1)

Mobile (1)

Name (2)

Home phone (2)

Relationship to child (2)

Mobile (2)

8 ATTENDANCE - Please indicate the days and hours your child will be attending.

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	Before/After Care	Before	After	Before	After	Before	After	Before	After	Before	After

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