STAFF-IN-CONFIDENCE (When filled out)

| Form Version: 2 | 2023.01 | | | | |
|----------------------|---------|--|--|--|--|
| Details reconfirmed: | | | | | |
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HobbyCare - Before & After School Care

Child information and Enrolment sheet

| | preferred start date an | | | | | you v | ould like your ch | nildren to at | t tend HobbyC | Care: | |
|-------------|--|--|--------------------|-----------------|----------------|---------------|--------------------------|-----------------|----------------------|----------------|--|
| Start Date: | | Morning Monday to Friday Afternoon Monday | | Monday | | Tuesday | Wednesday | Thursday F | Friday | | |
| | | | | | | | | | | | |
| Р | lease ensure all entries are | e printed clearly an | d legibly | so that we ca | an quickly g | et in to | uch with you or yo | ur emergenc | y contacts if ne | eded. | |
| 1. | Full name of child: | | | | | | | | | | |
| | | Surname | | First Name(s) | | | | | | | |
| | Child's birthday: | Day M | Month | Year | Gender: | Male / | Female / Other | Classroo | | r new entrants | |
| 2. | Full name of child: | | | | | | | | | | |
| | Child's birthdov | Surname | | | , | First Name(s) | | | Oleanous No | | |
| | Child's birthday: | Day Month | | Year | _ Gender: Male | | Circle | Classroom No.: | | | |
| 3. | Full residential addres | ss of child(ren): | Street | | | | | Suburb | | Post Code | |
| 4. | Primary Caregiver(s): | | | | | | | | | | |
| | , , , | Relationship | Surname | | | | First Name | | | | |
| | | Email: Mobile: | | | | | Othor | | | | |
| | | Mobile. | | | | | Other: | | | | |
| | | Relationship | Surname | | | | First Name | | | | |
| | | Email: | | | | | | | | | |
| 5. | Authorised Alternative | Mobile: e Contacts: | | | | (| Other: | | | | |
| | (to comply with regulatory re | equirements, at least | two (2) add | ditional contac | ts who are au | thorised | I to collect your childr | en, must be lis | sted) | | |
| | | a | | | | | Relationship | | Contact P | Phone Number | |
| | | b | | | | | | | | | |
| 6. | Persons who are not | Name | llect you | r children: | | | Relationship | | Contact P | Phone Number | |
| O. | i ersons who are <u>not</u> | authorised to co | iiect you | ii Ciliuren. | | | | | | | |
| 7. | Relevant medical info | ormation e.g., Me | dicines I | being taker | n, Asthma, | Diabe | tes, Allergies (fo | od, insect b | oites/stings) e | etc.: | |
| 8. | Please indicate any o | • | | ions or info | ormation th | at is re | elevant to the car | e of your cl | hild: | | |
| Con | ditions of Enrolme | ent: | | | | - | | | | | |
| 1. | Fees are to be paid 1 week | · | | | | - | | | | 41 4 . | |
| 2. | Children collected after the staff member is required to | wait. | Ü | | | | · | , | | eor, that a | |
| 3. | The standard daily fee will b | e charged in the ever | nt of <i>any</i> a | bsences for w | hich HobbyC | are have | e not been given at le | ast two weeks | ' notice. | | |
| I wish | to enrol my child in Hobby | Care and acknowle | dge that | I have read a | and agree w | ith all o | conditions as state | d above and | in the disclaim | ier. | |
| Signa | ature(s): 🗴 | | | | Naı | ne(s): | | | | | |
| Relat | tionship to child: | | | | | | | | | | |
| | | | | | F | | | | | | |
| Fo | or office use: | LASS RLBK ADE | SK SCAI | N CONF | | Pleas | e also read, fi | ll in and s | ign | | |
| Do |)E· | ппг | 1 🗆 | | | Discl | aimer' on the | reverse o | f this shee | t. | |

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| Defer e of the content of the |
|--|
| Disclaimer |
| I acknowledge that enters HobbyCare at my own risk. |
| Although the highest quality of care will be always exercised, HobbyCare cannot accept responsibility for any unforeseen misadventures. |
| Damages to Hobsonville School property and/or HobbyCare property caused by the named child(ren) shall become the responsibility of the primary care giver of the named child(ren). |
| You further acknowledge reading, understanding, and agreeing with the following conditions: |
| 1. You understand that you will be required to pay fees for the up-and-coming week in advance, and that failure to comply will result in a 15% late penalty on all fees outstanding. You will also be liable for any fees or expenses that HobbyCare reasonably incur in collecting overdue amounts, including collection agent fees, phone charges, legal expenses, and all bank charges in relation to dishonoured cheques and insufficient funds. |
| 2. You undertake to notify the Programme Staff if there is any delay with the collection of your child. You further undertake to collect, or have your child collected by 5:45 pm (if enrolled in after school care) otherwise you acknowledge you will be charged a late fee of \$17.00 for every 5 minutes, or part thereof, that staff are required to wait beyond the end of the programme. |
| 3. Fees are still payable for sessions booked where your child does not attend. However, you will not be required to pay fees for a period of more than 1 week of absence if you have notified HobbyCare at least two weeks prior to the absence. A minimum of two weeks' notice (14 days) is also required if you wish to permanently remove your child from the programme for whatever reason, otherwise you will continue to be billed for those sessions already booked, regardless. |
| Fess can be paid by internet banking, recurring automatic payments or cash direct to the supervisor at the programme venue. Payment records are available for recording cash payments and should be signed by the parent/caregiver and a staff member to verify the payment amount and time. All online payments can be made to HobbyCare account: 38-9019-0604104-00. |
| 4. a. All children must be signed into our morning programme and out of our afternoon programme. Only persons named as caregivers or authorised alternative contacts on the information and enrolment sheet can sign children out from HobbyCare. Any changes or corrections to the information overleaf should be referred to the HobbyCare Director at the earliest opportunity. |
| b. Parents are required to sign their children into the morning programme (if enrolled). HobbyCare cannot accept responsibility for any child left alone at the venue before 7:00am. |
| 5. Any problems or complaints should be referred, in the first instance, to the supervisor on duty, and if any matter remains unresolved it may be taken to the Director. |
| 6. You hereby give permission for HobbyCare staff to treat your child if a minor accident occurs. In the case of a more serious nature, you understand an ambulance will be called, and acknowledge that HobbyCare staff are not able to transport children to parents, Doctors, Hospitals, or any other place. HobbyCare will not be responsible for expenses incurred in dealing with medical or accident emergencies. |
| 7. Staff members are obligated to report any instances of suspected child abuse or neglect, whether at HobbyCare or observed in the wider community. The Director must report this to Tamariki Oranga – Ministry for Children and/or the New Zealand Police. |
| 8. You understand that the information contained herein is confidential and pursuant to the Privacy Act and will only be used to administer your child and not used or distributed for any other purpose. An approved officer of Oranga Tamariki — Ministry for Children has the statutory power to examine any records or documentation held by our organisation. Under the Privacy Act (1993) all information pertaining to you, held by HobbyCare is available for you to view. |

You acknowledge that HobbyCare reserves the right to immediately terminate your child's enrolment in the programme if

Date: _____

there are behavioural tendencies that are disruptive or have an adverse effect on the people or other children involved in this

programme.

Signature(s): X

Relationship to child:

Please also read, fill in and sign 'Disclaimer' on the reverse of this sheet.

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