

'JUST KIDDING' Crèche Enrolment Form

NAME OF CHILD	
First Name	Surname
Child's Date of Birth / /	Immunized Yes / No Copy attached <input type="checkbox"/>
NAME OF PARENT / S	
First Name/s	Surname
Address	
Postcode:	
Telephone	Mobile
EMERGENCY CONTACT	
Please provide the name of another adult contact in the case of an emergency and/or collection of your child: (Other than parents listed above)	
First Name	
Address	
Postcode:	
Telephone	Mobile
DETAILS OF THE CHILD:	
<u>Please provide details of your child:</u> (Toilet training, nappies, fears, breast fed/bottled milk etc and any other information you would like to tell us about your child)	
Does your child have any ALLERGIES? YES <input type="checkbox"/> NO <input type="checkbox"/> If yes please provide details:	
I give permission for staff to take developmental observations of my child YES / NO	
I give permission for staff to take photos of my child for display/advertising purposes. YES / NO	
ACCEPTANCE OF CONDITIONS OF USE	
<ul style="list-style-type: none"> • I accept that I must stay at the Eaton Recreation Centre while my child attends. • I understand that I am at all times responsible for my child while he/she attends the crèche. • I understand that I must immediately return to the crèche to attend to my child should I be requested to do so by crèche staff. • I consent to medical treatment being obtained for my child in an emergency. • I understand that I must book my child's place and sign the attendance book on arrival and on leaving and that I need to phone and cancel booking if my child does not attend. 	
Signature	Date: / /