

S.P.A.C.E. ENROLMENT FORM 2008 Discovery Centre & Art Programme

If you're enrolling more than one child, please complete a separate enrolment form for each child

CHILDS NAME:			
DOB:		AGE:	
ADDRESS:			
PROGRAMME ENROLLED: (choice of 2 s.p.a.c.e. programmes See below)			
1. GROUP/SCHOOL VISIT:		2. CASUAL WORKSHOP:	
DATE:		AVAILABLE ON THESE DATES/TIMES (circle)	
TIME:		THU 23 OCT 11am-12.30pm THU 30 OCT 11am-12.30pm	
MOTHERS / GUARDIAN DETAILS:			
NAME:			
ADDRESS: (if different to above)			
CONTACT NUMBERS:		(day)	(after hours)
EMAIL ADDRESS:			
FATHERS / GUARDIAN DETAILS:			
NAME:			
ADDRESS: (if different to above)			
CONTACT NUMBERS:		(day)	(after hours)
EMAIL ADDRESS:			
EMERGENCY CONTACTS: (not parent or caregiver)			
NAME:		RELATIONSHIP TO CHILD:	
CONTACT NUMBERS:			
ALTERNATIVE PEOPLE AUTHORISED TO ATTEND WITH YOUR CHILD:			
1.	2.	3.	4.
ADDITIONAL REQUIRED INFORMATION:			
PLEASE GIVE A BRIEF OUTLINE OF YOUR CHILD'S SPECIAL LEARNING NEEDS TO ASSIST US WITH OUR PROGRAMMING:			
CHILDREN MUST BE ACCOMPANIED BY A CAREGIVER FOR THE DURATION OF THE WORKSHOP. Please specify details: (Please add any additional relevant information)			
I give consent for photographs of my child to be used for Youthtown promotional purposes only		<input type="checkbox"/>	

Office use only:

Term 2	Term 3	Term 4
Date: <input type="checkbox"/> <input type="checkbox"/> / <input type="checkbox"/> <input type="checkbox"/> signed: _____	Date: <input type="checkbox"/> <input type="checkbox"/> / <input type="checkbox"/> <input type="checkbox"/> signed: _____	Date: <input type="checkbox"/> <input type="checkbox"/> / <input type="checkbox"/> <input type="checkbox"/> signed: _____
Full Name _____	Full Name _____	Full Name _____
RE# <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> - <input type="checkbox"/> Sign Out <input type="checkbox"/> Payment Schedule _____ (signed/staff when complete)		

PROGRAMME INFORMATION AND PARENTS RESPONSIBILITIES

1. Parents are required to inform Youthtown (prior to 9am) when their child/ren will be absent. Phone 379 5430 extn 804 or 805.
2. Authorised persons (in accordance with the enrolment form) are required to attend with the child/ren. Any deviation from the named authority must be advised to the programme co-ordinator and altered using a change of conditions form.
3. The programme complaints procedure is displayed and available at reception.
4. This programme has a detailed child protection policy, which includes the reporting of any suspected child abuse to the department of Child, Youth and Family Services.
Our policy and procedures manual is available from reception for you to view at any time.

TERMS AND CONDITIONS

Enrolment

5. **Enrolment is to be made in person prior to commencement of each workshop.**
6. For the safety of your child you must ensure all details completed as accurately as possible. (a minimum of 3 different contact details required)

Payment Conditions

7. The cost is \$15.00 per child per workshop.
8. Payments methods: Cash/ Cheque/ Eftpos (including major credit cards). We cannot accept internet banking or automatic payments due to processing costs.
9. The programme is substantially subsidised, as a result we **cannot provide refunds or transfers.**

Health and Safety

10. Access arrangements/custody details for your child must be detailed on the enrolment form.
11. In the event of an accident or illness, Youthtown will immediately attempt to contact the parent/ guardian and will take all appropriate steps to ensure the individual's well-being, but will not be liable for any costs (e.g. Doctors fees etc).
12. An accident/ incident register operates on the programme. If your child is involved in an accident/incident your child's name will be highlighted on the sign out sheet – please see reception for your copy.
13. Any medical conditions e.g. allergies must be indicated on the enrolment form. Medicine will not be administered without a Medical Consent Form.

Exclusion

14. Please note that Safety is Youthtown's paramount concern. If a child's negative behaviour is impacting the safety of the programme – Youthtown will enforce the Exclusion Policy.

15. A breach of terms and conditions will result in your child/ren being excluded from the programme until the matter has been resolved.

Privacy Act 1993

16. Information collected will be used for the purpose of establishing and maintaining records held by Youthtown Inc. Children's files will be available for perusal by caregivers with authorised access.

Disclaimer

17. While Youthtown; its employed and volunteer staff will take every care to provide proper supervision of all children Youthtown nor the employed or volunteer staff shall have any personal liability in respect of any act of omission arising from any session or activity of this service.
18. This is a binding agreement between the service provider (Youthtown) and the customer (Signatory).
19. By signing this document you have read and understood the Responsibilities and Terms and Conditions detailed.

All care will be taken to provide supervision of children attending the programme in accordance with programme policies and procedures.

Signed _____ (Parent/Guardian)

Full Name _____

Signed _____ (Reception/Co-ord)

Full Name _____