



PRE-SCHOOL APPLICATION FOR ENROLMENT

PART ONE: APPLICATION

CHILD'S DETAILS

Child's **official surname** or **family name**:

Child's **official given name**:

Child's **official other names / middle names** (please separate names with a comma):

Name your child is known by / preferred name:

Surname / family name:

Given name:

Official identification document/s sighted by staff:

New Zealand birth certificate

Foreign birth certificate

New Zealand passport

Foreign passport

Other _____

Staff initials: _____

Child's date of birth: **dd / mm / yyyy**

Male Female

Child's ethnic origin/s:

Iwi your child belongs to:

Language/s spoken at home:

Child's primary residential address:

Postcode:

PARENT/LEGAL GUARDIAN 1

Title: Mrs Miss Ms Mr Dr

Given names:

Surname/family name:

Address:

Postcode:

Phone (home):

Phone (work):

Phone (mobile):

Relationship to child:

Email:

Languages spoken:

Profession/occupation:

PARENT/LEGAL GUARDIAN 2

Title: Mrs Miss Ms Mr Dr

Given names:

Surname/family name:

Address:

Postcode:

Phone (home):

Phone (work):

Phone (mobile):

Relationship to child:

Email:

Languages spoken:

Profession/occupation:



CUSTODIAL STATEMENT (If applicable)

Are there any custodial arrangements concerning your child? Yes No

If yes, please give details of any custodial arrangements or court orders (a copy of any court order is required to enable the school to enforce these arrangements).

Person/s who **CANNOT** pick up your child:

Name:	Name:
Name:	Name:

ADDITIONAL EMERGENCY CONTACT – 1 (Also able to collect the child)

Given names:	Surname/family name:	
Relationship to child:		
Address:		Postcode:
Email:	Phone (home):	
Phone (mobile):	Phone (work):	

Please note that nominated parents/legal guardians will be contacted in the first instance in case of an emergency. In the event that Selwyn House Pre-school is unable to reach the parents/legal guardians, the nominated emergency contact above may be contacted. I agree.

ADDITIONAL EMERGENCY CONTACT – 2 (Also able to collect the child)

Given names:	Surname/family name:	
Relationship to child:		
Address:		Postcode:
Email:	Phone (home):	
Phone (mobile):	Phone (work):	

Please note that nominated parents/legal guardians will be contacted in the first instance in case of an emergency. In the event that Selwyn House Pre-school is unable to reach the parents/legal guardians, the nominated emergency contact above may be contacted. I agree.

ADDITIONAL PERSON/S WHO CAN PICK UP YOUR CHILD

Given names:	Given names:
Surname/family name:	Surname/family name:
Address:	Address:
Postcode:	Postcode:
Phone (home):	Phone (home):
Phone (mobile):	Phone (mobile):



CHILD'S DOCTOR

Name:

Phone:

Name of medical centre:

HEALTH

Illness/allergies:

Is your child up-to-date with immunisations? Yes No
(Please provide verification of all immunisations)

FOR STAFF USE ONLY:

Immunisation records sighted and details recorded Yes No

MEDICINE

Category (i) Medicines

A category (i) medicine is a non-prescription preparation (such as arnica cream, antiseptic liquid, insect bite treatment) that is not ingested, used for the 'first aid' treatment of minor injuries and provided by the service and kept in the first aid cabinet.

Note: The service must provide specific information about the category (i) preparations that will be used.

Do you approve category (i) medicines to be used on your child? Yes No

Name/s of specific category (i) medicines that can be used on my child, **provided by service:**

- Sunscreen
- Saline solution

Parent/Legal Guardian Name:

Signature:

Date: / /

Category (ii) Medicines

Category (ii) medicines are prescription (such as antibiotics, eye/ear drops etc) or non-prescription (such as paracetamol liquid, cough syrup etc) medicine that is used for a specific period of time to treat a specific condition or symptom, provided by a parent for the use of that child only or, in relation to Rongoa Māori (Māori plant medicines), that is prepared by other adults at the service.

I acknowledge that written authority from a parent is to be given at the beginning of each day a category (ii) medicine is to be administered, detailing what (name of medicine), how (method and dose), and when (time or specific symptoms/circumstances) medicine is to be given.

Parent/Legal Guardian Name:

Signature:

Date: / /

Category (iii) Medicines

To be filled in if your child requires medication as part of an individual health plan, for example for an on-going condition such as asthma or eczema etc., and is for the use of that child only.

FOR STAFF USE ONLY: Individual health plan sighted and a copy taken Yes No

Name of medicine:

Method and dose of medicine:

When does the medicine need to be taken: (State time or specific symptoms)

Parent/Legal Guardian Name:

Signature:

Date: / /

EXCURSIONS TO SCHOOL GROUNDS

I understand that as part of the programme at Selwyn House Pre-school, children and teachers will undertake regular outings to Selwyn House School to use the facilities of the school. During these outings Ministry of Education ratios will be maintained, both for those children leaving the pre-school and those remaining.

I authorise my child's participation in these outings. Yes No

PERMISSIONS

Please tick if you are happy for your child's photo to be used for:

Daily Diary and e-newsletters Displays in the pre-school Social media, marketing, and celebration videos

Please tick to give your permission for your child to receive vision and hearing screening by Matatiki Child and Youth Health: Yes No

DUAL ENROLMENT DECLARATION

I hereby declare that my child **is/is not** enrolled at another early childhood institution at the same times that he/she is enrolled at Selwyn House Pre-school.

Parent/Legal Guardian Name:

Signature:

Date:

FEE PAYER INFORMATION (If other than parent or legal guardian)

Title: Mrs Miss Ms Mr Dr

Given names:

Surname/family name:

Address:

Postcode:

Phone (home):

Phone (work):

Phone (mobile):

Relationship to child:

Email:

We acknowledge that we are jointly and severally liable for the payment of school accounts.
Please advise us of any change of address or contact details.

EXPECTED ESSENTIAL AGREEMENT OF CONDUCT For parents, caregivers, legal guardians and friends of the pre-school

The essential agreement is based on the school PYP values of respect, tolerance, integrity, empathy, commitment, cooperation and caring. It ensures that everyone within the school community is respected, safe and treated with dignity. The Expected Essential Agreement of Conduct asks that all parents, caregivers, legal guardians and friends of the school:

- Treat all people with respect
- Work together in partnership with staff for the benefit of their child/children
- Respect and demonstrate Selwyn House Pre-school values
- Set a good example to children and staff at all times
- Follow the appropriate and proper procedure to handle any complaints.

This essential agreement applies to speech, action or delivery through emails, texts, phone calls, social media or other communication and encompasses both the school and wider community environment.

I/We understand the above and agree to the Expected Essential Agreement of Conduct.

DOCUMENTATION TO SUBMIT WITH THIS APPLICATION

Please ensure that you have included the following with this completed application form

Copy of Immunisation Certificate

ENROLMENT FEE

**A non-refundable enrolment fee of \$110 (GST inclusive) is payable to confirm your enrolment application.
An invoice for this will be emailed to you.**



Selwyn House Pre-school has a number of policies that set out the procedures that are in place for the care and education of the children who attend. We strongly urge you to read these. The signing of this enrolment agreement form indicates that you will abide by the policies of this service, and understand how you can have input to policy review.

PART TWO: TERMS & CONDITIONS

The terms and conditions appended to this application, form and govern the student’s tuition at the school. By signing below, the school and the parents or legal guardians agree to those terms and conditions. Please ensure the terms and conditions are read carefully.

1. For the purposes of this Agreement the following terms shall have the following meanings:
 - Agreement** means this Agreement, including any schedules.
 - Application Form** means the standard enrolment form which forms the cover page of the Agreement.
 - Fee** means fees payable by the Parents or Legal Guardians to the School as per the Fee Schedule.
 - Fee Schedule** means the schedule of fees for Tuition, and miscellaneous charges.
 - Parents or Legal Guardians** means the parents or legal guardians referred to in the annexed Application Form.
 - School** means the pre-school referred to in the annexed Application Form.
 - Child** means the child/student referred to in the annexed Application Form.
 - Tuition** means the education of the Student at the School.
2. The Pre-school shall provide Tuition to the Student in accordance with pre-school policies, the Act and any other applicable laws, in return for the payment of the Fee.
3. The Parents or Legal Guardians acknowledge that they have read the school’s current Business Practices and agree to abide by the rules as set out therein.
4. The Parents or Legal Guardians acknowledge that they are ultimately jointly and severally liable for the payment of school accounts even in the event the “Fee Payer”, as described in this application, is different to themselves. In the event of failure to pay school accounts within the time specified, the School reserves the right to charge administrative and legal costs of recovery of outstanding amounts.
5. The Parents or Legal Guardians agree to the School making such enquiries in relation to his/her/their creditworthiness as the School considers fit; including obtaining from any third parties information about his/her/their credit worthiness.
6. The Parents or Legal Guardians agree to give ten weeks’ notice in writing to the Pre-school Head Teacher prior to withdrawal of a student. A full ten weeks’ fees in lieu of notice will be charged if a full ten weeks’ notice in writing is not received.
7. The School shall at all times comply with the Health and Safety at Work Act 2015
8. The Parents or Legal Guardians and Student acknowledge that:
 - (a) The Pre-school and School may obtain at any time, from any person or entity, any information it requires to process and/or accept the Student for admission to the Pre-school and School or to perform or complete any of the other purposes under this Agreement. The Parents or Legal Guardians and the Student authorise any such person to release to the School any personal information that person holds concerning the Student and/or Parents or Legal Guardians.
 - (b) If the Student and/or Parents or Legal Guardians fail to provide any information requested in relation to the Student’s admission to the Pre-School, the Pre-School may be unable to process the Student’s application.
 - (c) Personal information of the Student and/or Parents or Legal Guardians collected or held by the Pre-school and School may be held, used and disclosed to enable the Pre-school to process the Student’s eligibility to receive Tuition at the School and Accommodation.
 - (d) All personal information provided to the Pre-school and School is collected and will be held by the Pre-school and School
 - (e) The Student and Parents or Legal Guardians have the right under the Privacy Act 2020 to obtain access to and request corrections of any personal information held by the Pre-school and School concerning them.
 - (f) Under the Privacy Act 2020, any information collected may be provided to education authorities or third party platforms which the Pre-school and School deems necessary.
 - (g) Information relating to the education, health, welfare or safety of the Student, may be released to relevant parties outside the Pre-school and School, at the discretion of the Pre-school and School.
 - (h) In accordance with the Privacy Act 2020, Parents or Legal Guardians acknowledge that they may receive communications, marketing or promotional material on behalf of the School from third parties.
 - (i) The information in this form is collected to maintain Selwyn House School records and the records of groups associated with the School.

PARENT/LEGAL GUARDIAN DECLARATION

I declare that all the above information is true and correct to the best of my knowledge.

Parent/Legal Guardian Name:

Signature:

Date:

OFFICE USE ONLY – SERVICE DECLARATION

On behalf of Selwyn House Pre-school, I declare that this form has been checked and all relevant sections have been completed.

SERVICE PROVIDER Name:

Signature:

Date:

