



Enrolment Form

Privacy Statement

The information requested by Council on this form may constitute personal information under the Privacy and Personal Information Protection Act 1998. Council is allowed to collect the information from you to consider this matter. Supplying this information is voluntary. However if you cannot or do not wish to provide the information, we may not be able to consider the matter. If you need further details, please contact the Privacy Officer, Campbelltown City Council, cnr Queen and Broughton Streets, Campbelltown. Please note that information provided may be shared with Department of Education and Communities (DEC), the Police, other relevant agencies and educators in accordance with applicable legislation.

Service name

Have you used care with Council before? [] Yes [] No
If yes, which service

Information about the child

Family name Given name
Date of birth Gender [] Male [] Female
Home address Post code
Country of birth Language spoken at home

Is your child currently receiving funding or is an application currently being processed for additional support ie Inclusion Support Subsidy funding/additional worker at another child care service? [] Yes [] No

What is your child's cultural background?

- [] Aboriginal [] Torres Strait or South Sea Islander Background
[] Other Please specify

Child's CRN [][][] [][][] [][][] []
Account holder's CRN [][][] [][][] [][][] []

Full name of person registered for CCB
Date of birth of person registered for CCB Relationship to child
Any other name known by
Home address Postcode
Country of birth Primary language
Contact numbers (H) (M) (W)
Email address
Occupation Place of work

The account holder is the parent/guardian linked for Child Care Benefit (CCB) and must be the person who signs this form.

Does your child have any siblings attending another child care service? [] Yes [] No
If yes, what multiple child care benefit percentage is applicable to this enrolment ie (2 child, 3 child)

Information about the parent/guardian 2 (must be different to account holder)

Full name _____
Relationship to child _____ Date of birth _____
Any other name known by _____
Home address _____ Postcode _____
Country of birth _____ Primary language _____
Contact numbers (H) _____ (M) _____ (W) _____
Email address _____
Occupation _____

Orders relating to the child

Are there any court orders, parenting orders or parenting plans relating to the powers, duties, responsibilities or authorities of any person in relation to the child or access to the child? If yes, please give current details and provide photocopies of any court orders. Yes No

Other persons to be notified in the case of emergency

In the event of an emergency we will attempt to contact parents/caregivers as listed above. If we are unable to make contact we will attempt to contact your emergency contacts listed.

To assist us to deal with these situations, one of the following people authorised to collect and care for your child after an accident, injury, trauma or while they are ill will be notified. The emergency contacts listed on this form are the only people who can collect your child/ren if you cannot collect them yourself. All emergency contacts **must be over 16 years of age**. At least one emergency contact is required.

The below emergency contacts have my authority to consent to medical treatment, permit transportation by an ambulance service and/or permit medication to be given to my child. I have contacted all emergency contacts and advised them they are a nominated person for my child.

Emergency Contact 1

Name of contact _____ Relationship to child _____
Address _____
Contact numbers (H) _____ (M) _____ (W) _____
Email address _____

Emergency Contact 2

Name of contact _____ Relationship to child _____
Address _____
Contact numbers (H) _____ (M) _____ (W) _____
Email address _____

Emergency Contact 3

Name of contact _____ Relationship to child _____
Address _____
Contact numbers (H) _____ (M) _____ (W) _____
Email address _____

Parent/caregiver's name (please print) _____
Parent/caregiver's signature _____ Date _____

Child's medical and health information

Medicare number _____ Expiry date _____

Name of registered medical practitioner or medical service _____ Phone _____

Address _____

If your child suffers from asthma, diabetes or anaphylaxis, you are required to supply a medical management/action plan for educators to follow in the event of an emergency. A medical management/action plan can be supplied by the child's parent/guardian or family doctor.

Does your child suffer from:

Asthma Yes No **Diabetes** Yes No **Anaphylaxis** Yes No

Epilepsy (seizures) Yes No

If you have ticked 'yes' to any of the above, please supply an Education and Care Services Medical Management Plan completed by your doctor or a copy of a first aid plan supplied by your doctor.

General health information

Is your child under the care of a therapist or specialist? Yes No

If yes, please give details? _____

Does your child take regular medication? Yes No

If yes, please complete a medication form.

Does your child have an allergic reaction to any medication? Yes No

If yes, please give details _____

Is your child prone to febrile convulsions? Yes No

If yes, please give details _____

Does your child have any allergies or sensitivities eg bee stings, grass, bandaids etc? Yes No

If yes, please give details _____

Does your child have an adrenaline auto injector? Yes No
(Used to administer adrenaline in case of an anaphylactic reaction.)

If yes, what condition do you administer the adrenaline auto injector for? _____

Do you have any other medical/health concerns for your child? Yes No

If yes, please give details _____

If you have ticked 'yes' to any of the above special health needs or requirements, please attach a copy of the first aid/medical management plan.

Dietary needs

Do they have any special needs at mealtime (eg cultural/religious requirements, like to use chopsticks or their fingers)? Yes No

If yes, please give details _____

Does your child have an allergic reaction to any foods? Yes No

If yes, please give details _____

Does your child have any special dietary restrictions/needs? (eg vegetarian) Yes No

If yes, please give details _____

DATA AND DOCUMENT CONTROL

Child's immunisation record

As of 1 January 2014, a blue book and/or overseas records of immunisation are no longer acceptable.

The current documentation to be accepted are:

1. An **Immunisation History Statement** showing the child's immunisations are up to date (if the child has a medical contraindication for a specific vaccine(s) a Medical Contraindication Form will also be required), or;
2. A **Medical Contraindication Form** if the child is unable to be immunised with any vaccines due to medical reasons or;
3. A **Conscientious Objection Form** (or certified ACIR letter) if the child is unable to be immunised due to religious or philosophical reasons, or;
4. An **Immunisation History Form** where an immunisation provider has certified that the child is catching up their immunisations.

Your child cannot commence care until one of the above documents has been provided.

Information for bodies which provide funding to this service

From time to time government agencies seek information on the characteristics of families who use this education and care service. This is used in planning new policies, programs and resources to support services. To help provide accurate information please answer the following questions.

Does your child have a diagnosed developmental delay or disability including intellectual, sensory or physical impairment? Yes No

If yes, please give details _____

Does either parent have a disability? Yes No

If yes, please give details _____

Is the family a single parent family? Yes No

Other information

To assist Campbelltown City Council to provide the best possible service to your child the following information is required. This information will enable us to assess your child's specific needs and obtain any additional support and resources if required.

Is there any particular area of development that concerns you about your child? This may be behavioural (for example ADD, ADHD, Asperger's, Autism, continual biting etc), physical, emotional or social? Are there any special care instructions that may assist us in caring for your child? Yes No

If yes, please give details _____

Does your child use any support services to manage this? For example, Speech Therapist, Occupational Therapist, Physiotherapist, Counsellor, Case Worker or other service provider? Yes No

If yes, please give details _____

Does your child display any of the following behaviours:

- | | | |
|------------------------------------|---|---|
| <input type="checkbox"/> Tantrums | <input type="checkbox"/> Swearing | <input type="checkbox"/> Spitting |
| <input type="checkbox"/> Screaming | <input type="checkbox"/> Running away from adults | <input type="checkbox"/> Hitting/kicking/punching etc |

If you have ticked any of the above:

a) Are there any triggers that you are aware of that cause these behaviours? Yes No

If yes, please give details _____

(b) How do you currently manage these behaviours? _____

DATA AND DOCUMENT CONTROL

Is there other areas of development that concerns you about your child? (This may be behavioural, physical, emotional or social.) If yes, please outline any special care instructions that may assist us in caring for your child (triggers, management strategies etc.) Yes No

Parent Acknowledgement – Full Information Disclosure About Enrolled Child

The best and most successful way for Council’s Education and Care Services to support the enrolment of your child and family, is to know about any medical diagnosis for your child, all their developmental information, as well as, any community or support agencies that are supporting your child and family.

To set your child and family up for success with this placement, and to continue the enrolment of your child, you are required to read and sign the acknowledgement and disclosure form below:

Parent Agreement

I, (parent name) have fully disclosed all information about my child, (child’s name) to ensure a successful placement in our

Education in and Care Service, including:

- all current information on my child’s development
- all current information of any diagnosed illness, disability or additional support need
- all information on any current process of diagnosis for an illness, disability or additional support need my child is going through
- all current information for any doctor, paediatrician or specialist working with, or supporting my child/family
- all current information of any community, support or referral agency working with or supporting my child/family

In addition:

- I understand that by signing this acknowledgement and disclosure I am agreeing that I have supplied all current and relevant information about my child that will support the placement and enrolment of my child with Education and Care Services.
- I understand that if I have not provided all current information about my child for this enrolment that my child’s position at the service will be reviewed immediately and I may forfeit my child’s enrolment with Education and Care Services.

Parent name _____

Parent signature _____ Date _____

Please indicate any religious or cultural beliefs/practices or occasions held which you would like observed at the service for your child.

Please indicate special occasions you celebrate (please tick)

Easter Christmas Birthdays Father's Day Mother's Day
Chinese New Year Other

Is your child permitted to participate in festivities including birthdays and activities involving Santa and the Easter Bunny? Yes No

Please specify any traditional/cultural/religious celebrations that you do **not** want your child to participate in.

Are there any activities in the service which may contravene with your family values or beliefs? Yes No

If yes, please give details _____

Are there any particular words or expressions you would like us to use with your child? Yes No

If yes, please give details _____

Does your family have any rules regarding discipline, affection etc? Yes No

If yes, please give details _____

Does your child have any known fears eg dogs, the dark, noise etc? Yes No

If yes, please give details _____

Does anyone live in the child's home apart from parents and siblings? Yes No

If yes name _____ relationship to child

Does your child have any pets? If yes, please complete Yes No

pet _____ name _____

pet _____ name _____

Is there anything else the service should know about your child? ie favourite activities Yes No

If yes, please give details _____

Do you have anything you may like to contribute to the service program eg music CDs, DVDs from a home culture, magazines, papers or books in other languages or that your child enjoys, pictures or family photos? Yes No

If yes, please give details _____

Settling needs (Long Day Care Only)

Does your child get upset when left with other people? Yes No

What is the best way to settle your child? _____

Does your child have a special toy or object during the day? Yes No

If yes, please give details _____

Are there any words that we need to know that have a special meaning for your child? Yes No

If yes, please give details _____

Child care needs

Preferred date care is required from: _____

DATA AND DOCUMENT CONTROL

It may not be possible for your child to commence care on this date. A starting date will be confirmed with you at your administration appointment.

Please complete relevant service type for care required.

Long Day Care **Family Day Care**

What days do you require care? (Please tick)

Monday Tuesday Wednesday Thursday Friday

Family Day Care only Saturday Sunday

Approximate arrival time _____ Approximate departure time _____

Long Day Care only - half day care 7.00am – 12.15pm 12.45pm – 6.00pm

What days and sessions do you require care? (Please tick)

Monday <input type="checkbox"/>		Tuesday <input type="checkbox"/>		Wednesday <input type="checkbox"/>		Thursday <input type="checkbox"/>		Friday <input type="checkbox"/>	
am <input type="checkbox"/>	pm <input type="checkbox"/>	am <input type="checkbox"/>	pm <input type="checkbox"/>	am <input type="checkbox"/>	pm <input type="checkbox"/>	am <input type="checkbox"/>	pm <input type="checkbox"/>	am <input type="checkbox"/>	pm <input type="checkbox"/>

Outside School Hours Care

What days and sessions do you require care? (Please tick)

Monday <input type="checkbox"/>		Tuesday <input type="checkbox"/>		Wednesday <input type="checkbox"/>		Thursday <input type="checkbox"/>		Friday <input type="checkbox"/>	
am <input type="checkbox"/>	pm <input type="checkbox"/>	am <input type="checkbox"/>	pm <input type="checkbox"/>	am <input type="checkbox"/>	pm <input type="checkbox"/>	am <input type="checkbox"/>	pm <input type="checkbox"/>	am <input type="checkbox"/>	pm <input type="checkbox"/>

Casual care only. Parents are required to give 24 hours' notice to make a casual booking. This ensures that all children needing care are collected by staff at the nominated meeting point.

Which primary school does your child attend? _____

What class are they in? _____ Teacher's name _____

Priority of Access

All services must comply with enrolment priority and access guidelines set by the Family Assistance Office Department of Human Services.

1. A child at risk of serious abuse or neglect.
2. A child of single parents who satisfied, or of two parents who both satisfy the work/training/study test.
3. Any other child.

Is the child care required for work/study related reasons? Yes No

If you are a non working/studying parent, the Australian Government will only provide funding for 24 hours per week. You may exceed 24 hours per week however the excess hours must be paid for in full by you and will not be covered by Child Care Benefit (CCB).

Does your child attend another child care facility at any time? For example, before/after school care, family day care or another service? Yes No

If yes, how many CCB hours are claimed per week at this service? _____

Privacy

We respect your privacy

In order to provide you with the highest standard of service we are required to collect personal information from you about yourselves and your child/ren. We are committed to protecting your privacy and we abide by the National Privacy Principles contained within the *Privacy Act*.

DATA AND DOCUMENT CONTROL

What information do we collect, why and how is it used?

Basic details are usually collected from parents such as your name, address and phone contact, but it is also necessary to collect details regarding your child's name, date of birth and medical details, health, routines, likes and dislikes, which make up a personal profile.

In addition, we are required to hold information regarding your Child Care Benefit entitlement. All this information is vital in assisting us to provide the best possible care for your child, and for processing payments. Some of the information we collect is to satisfy our legal obligations under relevant childcare legislation.

Naturally much of this information is of a personal nature and some of it might be regarded as 'sensitive' and not the sort of information that you would wish to have unnecessarily disclosed to others.

We assure you that:

- Information kept will not be disclosed or communicated, directly or indirectly, to anyone other than:
 - medical and developmental information this is required to adequately provide education and care for your child,
 - The Department of Education and Communities or an authorised officer,
 - as permitted or required by any Act or law.

- Individuals will be allowed access to their personal information held about them or their child as requested without excessive delay, information may be denied under the following conditions:
 - Access to information could compromise the privacy of another individual.
 - The request for information is frivolous or vexatious.
 - Information relates to legal issues, or there are legal reasons not to disclose information such as cases of custody and legal guardianship.

- Our staff will take reasonable steps to ensure that information about the education and care service, management information, other educators, children and families is not disclosed or communicated without written permission or legislative authority.

- Reasonable steps will be taken to ensure details we keep about your family are accurate, up to date, complete and maintained in a private and confidential manner in accordance with the Commonwealth Privacy Act, 1988 and the Education and Care Services National Regulations. It is your responsibility to keep the service informed of any changes to your child's or family details.

- If a student has a valid training requirement that involves the gathering of certain information pertaining to your child or family the student must have written consent from you and the service supervisor, if it affects your child.

- Information gathered is used only for the education and care for the child enrolled in the service and appropriate systems will be put in place to ensure files will be stored or disposed of in a confidential and ethical manner.

What to do if you have a complaint

All privacy related comments, feedback or complaints should be directed to service management. We will follow up complaints within 14 days and resolve them to maintain our high standards of service provision.

Who else respects privacy?

Office of the Federal Privacy
GPO Box 5218
SYDNEY 2001

Lawful Authority

Parents

All parents have powers and responsibilities in relation to their children which can only be changed by a court order. The *Children's Services Act 1996* refers to these powers and responsibilities as 'lawful authority'. It is not affected by the relationship between the parents, such as whether or not they have lived together or are married.

A court order, such as under the *Family Law Act*, may take away the authority of a parent to do something, or may give it to another person.

Guardians

A guardian of a child also has 'lawful authority'. A legal guardian is given legal authority by a court order. The definition of "guardian" under the *Children's Services Regulation, 2004* also covers situations where a child does not live with his or her parents and there are no court orders. In these cases, the guardian is the person the child lives with who has day to day care and control of the child.

Conditions of Enrolment

Expectations of Behaviour

The positive guidance of children's behaviour by educators is essential to the provision of a safe, interesting and relaxed recreational learning environment.

The purpose of educator support and guidance is to ensure:

- the successful placement of your child at the service
- the safety and the security of the children and educators
- the rights and feelings of children and educators are respected
- the smooth running of the service
- children's self-management of behaviour

While most children settle well into child care a few children find it more difficult to become familiar and comfortable in this setting.

In order to protect all children and staff within our services and provide a safe place to play and engage, it is important that we monitor and review children's behaviours. If your child's behaviour at the service causes injury or a threat to others, then your child's ongoing placement within our service will be reviewed.

Council staff and educators can assist families and children with support referrals to agencies to assist if required.

Every attempt will be made to work with your family and child and implement strategies to assist and support your child. However should this not be successful and the behaviour continues, we will have no choice but to review and/or discontinue your child's position at the service.

Review of a child's position may include suspending or discontinuing care. This is never an easy decision to make, however, in order to ensure safety and security for all children and educators it is sometimes the only step that can be taken.

A child's position will be reviewed if the following unacceptable or dangerous behaviours are displayed:

- Bullying – indicated as repeated behaviour which is used to deliberately and intentionally intimidate, frighten, hurt, dominate, harass, or intimidate others.
- Threatening or intimidating behaviour or language toward other children or educators with regard to social harm, physical harm, sexual harm, emotional harm including swearing.
- Hitting, punching, pushing or other physical force or harm of a child or educator.
- Deliberately taking or destroying property or belongings of others including throwing equipment and furniture.
- Running away from the service.
- Consistently and deliberately failing to do as they are asked by educators.
- Any other behaviour that threatens the personal safety of others in the service.

These behaviours are unacceptable, and parents will be called to collect their child immediately.

The service supervisor, in collaboration, with parents and educators will discuss the behaviour and follow the Children and Family Support Procedure. (Please refer to page 26 of the family information booklet for more detailed support information).

Authorisations/Acknowledgements

Attendances

- I must fully complete an enrolment form and inform the service or Council's administration team of any changes thereafter. This is a legal requirement.
- If I require a change in my child's Long Day Care/Outside School Hours Care arrangements, I will notify the administration team in writing. All changes and cancellations must be in writing. (Change of Days/Ceasing Care Form to be completed.)
- If I require a change in my child's care arrangement, I will complete a new contract booking form (Family Day Care only).
- I understand that if a full time position for a Priority 1 or 2 family is required at the service, I can be asked to relinquish my half day position or change to a different day or service.
- I must sign the accident/injury/illness and/or medication book each day if applicable.
- I must notify the service before 8.30am if my child will not be attending Long Day Care Care for any reason.
- I must notify the service before 2.00pm if my child will not be attending Outside School Hours Care for the afternoon session. I am aware that if I do not notify the service or administration team before 2.00pm of my child's absence from after school care, I will be required to pay an additional charge (as per the current fee schedule).
- I am aware that if I require a temporary alternative day in care for my child I will be charged an extra day as booked days cannot be transferred. The service cannot guarantee that places will be available for temporary alternative care.
- I must sign the attendance sheet on arrival and departure. This is a legal requirement.
- I understand that I must complete an 'Authority to Release Form' for any person I request to collect my child not listed on the enrolment form as an 'emergency contact'.
- I am aware that a portfolio of my child's experiences is available from the service. (Long Day Care/Family Day Care services only.)

Absences (Long Day Care/Outside School Hours Care and Family Day Care)

- I understand that absences from the service need to be signed on the sign in/out sheets on the next visit to the service.
- I understand that I must pay full fees for any absent days for any reason my child takes in excess of 42 allowable absence days per financial year (Child Care Benefit will not be paid on any absence days taken in excess of 42 days per financial year).
- I understand that if my child is absent and I don't notify the service or the administration team within two weeks, I will lose my child's place at the service. I understand my one week advance fees will be used towards outstanding fees for this period and I will be responsible to pay any outstanding fees.

Health/Medication

- I understand educators will attempt to call me in the first instance should my child develop a high body temperature and become unwell. Should this attempt be unsuccessful I give permission for educators to administer paracetamol (Panamax Elixir) on my behalf in an effort to reduce my child's temperature.
- I understand that educators will make all attempts to contact me should my child have trouble breathing and is not diagnosed with asthma. I give permission for educators to administer an asthma reliever puffer on my behalf in an effort to assist with my child's breathing difficulties.
- I consent to bandaids being applied to my child.
- In the event that my child becomes unwell or shows symptoms of any transmittable infection/disease, I am aware that my child may be excluded from the service until the condition has been treated or a clearance has been provided. (Please refer to the medical exclusions table in the Family Information booklet.)
- I authorise educators at the service to apply sun block to my child regularly during the day. If my child is allergic to the sunscreen the service uses, I will provide sunscreen to be used on my child. (Long Day Care only.)
- I authorise educators at the service to use nappy wipes on my child. If my child is allergic to the nappy wipes the service uses, I will provide nappy wipes to be used on my child. (Long Day Care only.)
- If my child is sick, I will find alternative care arrangements and notify the service of my child's absence.
- If my child is not immunised against vaccine preventable diseases, the Department of Health may require my child to be excluded from the service during any outbreaks of these illnesses within the service. (NB - your child's fees are still required to be paid when your child is excluded.)
- If my child becomes unwell while at the service, I will be contacted to collect my child as soon as possible and I understand that my child will be cared for away from other children (where possible) until he/she is collected.
- I understand that staff will take every care of my child while he/she is at the service but cannot be held responsible for any accidents that may occur.
- I authorise the service to seek urgent medical/dental or hospital treatment and/or ambulance service in the event that my child becomes sick, has an accident or an asthma attack and needs emergency medical/dental or hospital treatment. Service staff will contact me once all necessary emergency medical/dental treatment for my child has been obtained. I agree to pay all medical/dental expenses.

- If my child requires medication, I will hand the medication to a staff member on arrival with the relevant completed Education and Care Services medical authority form ie short term or long term medication. **I will not leave medication of any type in my child's bag.**
- I must collect my child's medication at the end of each day.
- I am aware that **all** Council's Education and Care Services are "nut free". Should my child arrive at the service with a nut product this will be replaced with a nut free substitution food item.

Publicity

I agree to my child's photograph, first name and age and/or their work being used in marketing promotions to the wider community including social media for example Facebook, and Campbelltown City Council's Education and Care Services website. Yes No

I understand that this may mean that other parents also receiving this daily diary email can potentially copy, reproduce and repost that image in other electronic forums without my knowledge or consent. Yes No

I understand that observations will be made on my child by the staff within the service. This may include photos of my child for their portfolios, daily journal/diary, projects and other developmental regulatory documentation. The service provides an electronic/hard copy educational program for each child through programming and observations. Yes No

Emergency Evacuation

- I understand that my child will participate in emergency evacuation drills and in the event of an emergency eg fire at the service; the children will be required to evacuate the premises and will assemble at a central point of safety. The children will be fully supervised by educators.

Bus Permission (Outside School Hours Care)

- I give permission for my child to travel on Campbelltown City Council's Education and Care Services bus to and from: (please tick appropriate box below)
- Raby Outside School Hours Care** **Campbelltown City Outside School Hours Care**

Fees

- I understand that an enrolment fee (as per the current fee schedule) is payable.
- I agree that I am responsible for paying all the fees for my child.
- I understand I must pay one week fees at the full rate as advance fees.
- I agree to keep my one week advance fees at full rate up to date if fees increase or my booking changes.
- I agree to pay fees by the Friday of each fee week and that my account must remain one week in advance at all times. (Long Day Care/Outside School Hours Care only.)
- I understand that to maintain my child's place at the service, I must pay for the day(s) booked even if my child does not attend for the day. This includes leave such as family holidays or any other reason.
- I am aware that fees are applied for the time booked and must be paid prior to my child starting care for that day. (Casual Long Day Care/Outside School Hours Care.)

DATA AND DOCUMENT CONTROL

- I am aware that my child's position may be suspended or terminated should my account not remain one week in advance at all times. (Long Day Care/Outside School Hours Care only.)
- I understand that I must pay a late fee as per the current fee schedule, if my child is collected after the service's closing time or in the case of half day care; dropped off earlier or collected later than the hours of booked care.
- I understand that I must give two weeks notice in writing when my child no longer needs care. I am aware that if I do not do this, I may have to pay full fees for those two weeks.
- I understand that I will not hold the service responsible if I fail to read the information given to me via email, routine forms, newsletters, memos or any other correspondence.
- I understand that I must notify the administration team of any change that may impact my multiple Child Care Benefit rate eg if siblings either start or stop using child care. I understand that not notifying the administration team of these changes could incur a Centrelink debt.
- I understand that all information contained in this form needs to be kept up to date.
- I have read and accepted the above information. I have answered all the questions above
- I have read, understand and accept the 'Expectations of Behaviour' contained in the Conditions of enrolment section of this form.
- I have discussed the 'Expectations of Behaviour' with my child and will work in collaboration with the service supervisor and educators to support my child's understanding of the expected and acceptable behaviours while in care.
- I understand that should my child not follow these expected behaviours my child's position will be reviewed and may potentially cease.

Pre-school Education and Program

- I acknowledge that my child will be involved in pre-school education curriculum..
- I am prepared for my child to participate in the following educational curriculums:
 - literacy
 - numeracy
 - language
 - science and technology
 - physical activity
 - social skills
 - fine motor skills

I have read and fully understand all the above authorisations/acknowledgements.

Full name _____

Signature _____ Date _____

How did you find out about Campbelltown City Council's Education and Care Services

Council's Education and Care Services is always trying to improve our communication with families. To assist us with this, we would greatly appreciate you taking a couple of minutes to fill in this form.

How did you find out about Council's Education and Care Services?

Please tick more than one box if necessary.

- Mail flyer
 - Radio advertisement
 - In Macarthur Magazine
 - Word of mouth
 - Campbelltown Council Education and Care Services Facebook Page
 - Social Media
 - Yellow Pages
 - Local telephone directory
 - Local newspaper
 - Newspaper or editorial story
 - Internet website
 - Bus shelter advertising
 - Drove past service
 - Outside School Hours Care Bus
 - Other
-