



# Tanderra

## Out Of School Hours Care

This page may be completed when adding a new child to an existing enrolment form

### ADDITIONAL CHILD

Child's Full Name: \_\_\_\_\_

Address of child: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Date of birth: \_\_\_\_\_ Sex: Male / Female

Child's cultural background: \_\_\_\_\_

Is your child of aboriginal or Torres Strait Islander origin?

- No
- Yes, Aboriginal
- Yes, Torres Strait Islander

Language/s spoken by child: \_\_\_\_\_

School Attended: \_\_\_\_\_

Child's Centrelink Reference Number (CRN): \_\_\_\_\_

Permanent days you wish your child to attend the centre (Please underline):

**Before School care:**      MONDAY      TUESDAY      WEDNESDAY      THURSDAY      FRIDAY

**After School care:**      MONDAY      TUESDAY      WEDNESDAY      THURSDAY      FRIDAY

OR

I require casual care or vacation care only

\* A separate form must be completed prior to each Vacation care period.

Please be aware that days booked **must be paid for**, whether the child attends or not.

Child's expected start date at the service: \_\_\_\_\_

Does your child have any cultural, religious or dietary requirements? YES / NO



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If **YES** please provide details: \_\_\_\_\_

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Does your child have any allergies (including asthma or anaphylaxis) or medical conditions? YES NO

If **YES** please provide details, including a copy of a medical management plan or risk minimisation plan prepared by the child's doctor, if applicable:

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Does your child require regular medication? YES NO If **YES** please provide details:

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**NOTE:** Medication will only be administered to a child in accordance with the Centre's Medication Policy.

Does your child have a diagnosed disability or require additional assistance to meet their needs?

YES NO If **YES** please provide details: \_\_\_\_\_

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Has your child received the necessary immunisations for their age? YES NO If **NO**, please detail reason:

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Is there anything else our staff needs to know about your child? (e.g. interests, dislikes, likes fears etc.)

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**NOTE:** Staff will also talk to your child about their ideas and interests on a regular basis and incorporate these into the programme.

Parent Signature: \_\_\_\_\_

Date: \_\_\_\_\_