

Hendon Primary School-OSHC — Enrolment Form

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This information is confidential and will be available to supervising staff and emergency personnel.

Family Name	Family Name	Family Name
Child's Preferred Name	Child's Preferred Name	Child's Preferred Name
Residential Address	Residential Address	Residential Address
Birth Date	Birth Date	Birth Date
CRN number	CRN number	CRN number
School	School	School
Year Level/ Room Number/ Teacher	Year Level/ Room Number/ Teacher	Year Level/ Room Number/ Teacher
<p>W CARE ELSEWHERE Y/N. If yes how many.....</p> <p>I am claiming childcare Benefit at other Approved Childcare service (which includes LDC, OSHC, FDC, etc)for this number of children.</p>		

Parent/Guardian Information

1: Parent/Guardian Name	2: Parent/Guardian (Name only required)
Birth date (legally required)	
Parent CRN number	
Postal Address	Postal Address
Home Address	Home Address
Place of Work]Address	Place of Work/Address
Wk Phone Mobile	Wk Phone Mobile
Hm Phone	Hm Phone
e-mail contact	contact
I would like my Accounts sent via E-mail YIN	

Emergency Contacts (If parent/guardian cannot be contacted, emergency contacts will be notified)

1. Name	1. Name	1. Name
Address	Address	Address
Phone Mobile	Phone Mobile	Phone Mobile
Relationship to Family	Relationship to Family	Relationship to Family

Other people Authorised to collect child/children (Please advise staff if this information changes)

1. Name	Address	Phone
2. Name	Address	phone

Custody/Access

Are there any Family Court Orders?

Yes (Please attach a copy of the order

Are there any Restraining Orders in relation to the child/children? No

Yes (please attach a copy of the order)

Comments.....

NB It is the parent's responsibility to inform the OSHC staff of any relevant and useful information that is in relation to the child or the family. This allows the OSHC staff to provide informed quality care for your child/children.

Hendon Primary School OSHC Enrolment Form

Medical and Health Information (Confidential)

This information is confidential and will be available only to supervising staff and emergency medical personnel one form per child

Family Name	Child's Name	Date of Birth
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Has the child received all immunisations appropriate for her/his age YES/NO

If no, please give details

Has the child received the following immunisations? (Please tick):

	4years	
Diphtheria		<input type="checkbox"/>
Tetanus		<input type="checkbox"/>
Pilo		<input type="checkbox"/>
Pertussis (whooping cough)		<input type="checkbox"/>

	10-15 Years	
Hepatitis B		<input type="checkbox"/>
Diphtheria		<input type="checkbox"/>
Tetanus		<input type="checkbox"/>
Pertussis (whooping cough)		<input type="checkbox"/>
Varicella (chickenpox)		<input type="checkbox"/>
Human Papillomavirus (HPV)		<input type="checkbox"/>

I accept full responsibility if my child is not immunised.

Parent/Guardian signature:

Health Support

Does your child have a health care need that could affect their safety at Out of school Hours Care? No

Yes If YES please tick the boxes below that show your child's health care needs,

Asthma		Incontinence	
Is your child under a health care plan for Asthma?		Joint Disorder (e.g. arthritis)	
Epilepsy		Ear Disorder (e.g. arthritis)	
Heart Disorder		Hearing Impairment	
Vision Impairment		Communication difficulties	
Seizures/convulsions		Skin condition (e.g. dermatitis)	
Allergies (e.g. bees, peanuts dairy)		Swallowing/choking difficulties	
Diabetes		Other (please give details)	

Health Care Plan

Out of School Hours Care staff need a written health care plan from your child's doctor/treating health professional to plan for any special health needs. Have you attached the health care information from your child's doctor/treating health professional?

If No, staff will provide standard supervision for safety & first aid

If YES write down what you have attached (e.g. asthma care plan; details about ear care)

Medication

Does your child have any routine health care needs (e.g.: medication

Yes please attach a medication plan from your doctor or treating health care professional.

Doctor's Name	Clinic Name
Address	Phone Number

Are there any special dietary requirements relation to your child?

No

Yes please give details

Does your child need special aids or equipment (e.g. Glasses, hearing aids, calipers No

Yes please give details

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1. All medication must be supplied in the original container with the pharmacy label and the child's name clearly marked on the container.
 2. A permission to administer medication form must be signed by the parent/doctor before medication can be administered by OSHC staff or self-administered by a child over 8 years of age. Parent/Guardian/Approved Person

Signature

Date

Information for Parents

Child Participation

I give consent for my child/children to participate in the OSHC program and understand that OSHC staff will notify parents/guardians of each individual excursion.

I give consent for my child/children to attend afterschool activities held on the school ground or leaving the school ground with the primary school staff e.g. homework club etc.

I understand it is my responsibility to advise staff if I do not wish my child/children to participate in a particular activity. Excursions are the exception, as that is the only planned activity programmed for that day.

Child Information

I give permission for OSHC staff to exchange information relating to my child with school staff and to the appropriate person(s) (e.g. in an emergency/ special needs of my child/children, and behaviour management plans).

Written permission

I understand that OSHC staff require written consent for my child/children to travel alone to and from the OSHC service. I am aware that the Director or other qualified staff members will sign my child/children in and out of the service and the arrival and departure times will be noted.

Photo consent

I consent to photographs (still or video) being taken of my child/children as part of the OSHC program and to be displayed around the OSHC site on display boards and in Educa App and the school newsletter.

Work Consent

I consent to my child's work being published in an OSHC newsletter and displayed in the OSHC area

Movies

I consent for my child/ren to view videotapes/movies/DVDs which are rated (F) Family, (G) General and (PG) Parental Guidance.

OSHC Behaviour Management

The OSHC program has a Behaviour Management Policy in place where the main feature is to recognise and support positive behaviours, Children who are displaying violent or aggressive behaviour towards other children and staff will be excluded from the program, in line with the Schools/ OSHC Behaviour Management Policy. I understand that it is the responsibility of the parent to inform the OSHC staff of the child's behaviour needs. (A copy of the behaviour management process is available in the OSHC Policy Folder.)

Permission to inspect for Head Lice

The South Australian health commission recommends that everyone check their hair every week for head lice.

Checking and treating hair is by law a parent's responsibility.

I understand that I will need to collect my child, if OSHC supervising staff members believe that my child has head lice. I understand it is my responsibility to arrange collection of my child from OSHC when notified.

Sun Protection

OSHC follows the guidelines of the Cancer Council Sun Smart program that recommends children wear appropriate hats while outside. All children and staff must wear an appropriate hat. Information on appropriate hats is available from OSHC We follow the No Hat/No Play policy. In line with the school Sun safe policy, hats must be worn Term 1- Term 4

Fees

In accordance with the service policies, I agree to pay the required fees for my child's/children's booked care for OSHC. I agree to pay all extra costs relating to outstanding fees and late fees as well as excursion costs. I understand that Child Care Subsidy is available through the Family Assistance Office to assist the cost of my Child Care Fee.

Fees will be charged at:

Before school care \$14.50

After school care \$ 26.00

Early Dismissal \$30

School closures, Pupil Free days & Vacation Care \$ 65.00

Fees may change in line with our Policies and Procedures

Medical Emergency

In the event of a medical emergency, OSHC staff will call an ambulance in line with standard first aid training. I understand that I am responsible for the cost associated with medical care, ambulance and hospital costs.

I give consent for my child/ren to be taken by a staff member to the local hospital or doctor's surgery in the event of a minor injury.

ACECQA

I am aware that Hendon Primary School OSHC is registered With the Australian Children's Education and Care Quality Authority. Hendon OSHC strive to make continuous improvements (QIP) following the National Quality Framework rating and assessment process

Privacy Act

I understand the information provided on this Enrolment/Medical Form:

Is collected for the purpose of registration, program planning, preparing statistics, reporting and evaluation May be disclosed to and used for the purposes by Commonwealth and State government departments and their agencies May otherwise be disclosed without consent where authorised or required by law.

Information to Parents

I have read the OSHC Family Information Package and agree to comply with the OSHC service policies and procedures outlined. Full information on OSHC policies, procedures and guidelines will be located in the OSHC room.

Hendon Primary School Service aims to provide a quality Out of School Hours Care service at an affordable price to parents who have children eligible to attend under the Commonwealth Government Priority of Access Guidelines,

Due to increasing costs fees are reviewed regularly and are subject to change, parents will be notified prior to these changes taking place. Fee levels will be set by the operator/management committee each year, on completion of the annual budget and according to the service's required income.

When OSHC fees are outstanding over \$100 or more after a three week period, accounts will be forwarded to the debt collection agency.

A NOTE FROM THE OUT OF SCHOOL HOURS CARE MANAGEMENT COMMITTEE

Dear Families

Invoices are sent out weekly and payment is required within 7 day after the date of the invoice. After three reminders the matter will be put in the hands of a debt collection agency without any further notice, at which time children will be excluded from the OSHC program. Families, who are experiencing financial hardship at any particular time, please contact the Director to negotiate a staged payment plan.

Parents with children attending OSHC are required to sign that they have read and agreed to the payment policy, this is located on your child/rens enrolment form. Please note:

"YOU shall pay for all costs incurred by Hendon OSHC (including costs that Hendon OSHC Inc may be contingently liable) in any attempt to collect any monies owed by YOU "I have read and acknowledge the Policy on FEES AND DEBT COLLECTION.

Signature

Date:

Bookings

Child/children commencement date:

For care to commence between both parties (Parent/ Guardian and service provider (Hendon OSHC)both need to agree to the following arrangement types.

Please circle which arrangement will suit your circumstances:

Written Arrangement: Care that will be a regular booking

Relevant arrangement: Care in which you won't be claiming Child care subsidy

Arrangement with an organisation: where fees are paid by another organisation

Additional Child Care Subsidy: Child well Provider eligible arrangements

Before School Care

Regular Bookings YIN

Please tick your children on days you require regular bookings

Casual Bookings YIN

Please tick your children on days you require casual bookings

Flexible booking (combination of Regular and Casual bookings) YIN

Please tick your children on the days you require flexible bookings

MONDAY 7.00-8.30AM	TUESDAY 7.00-8.30AM	WEDNESDAY 7.00-8.30AM	THURSDAY 7.00-8.30AM	FRIDAY 7.00-8.30AM

After School Care

Regular Bookings YIN

Please tick your children on days you require regular bookings

Casual Bookings YIN

Please tick your children on days you require casual bookings

Flexible booking (combination of Regular/ Casual booking) YIN

Please tick your children on the days you require a flexible bookings

MONDAY 3.00-6PM	TUESDAY 3.00-6PM	WEDNESDAY 3.00-6PM	THURSDAY 3.00-6PM	FRIDAY 3.00-6PM

, Vacation Care.

PLEASE NOTE: VACATION CARE REQUIRES SEPARATE BOOKINGS. VACATION CARE PROGRAM AND BOOKING FORMS ARE SENT OUT EACH TERM IN WEEK 6 FOR REGULAR USERS OR CAN BE COLLECTED FROM FRONT OFFICE OR FROM OSHC ROOM.

Information/Comments:

Parent/ Guardian Signature _____ Date: _____



HENDON PRIMARY SCHOOL

ACCEPTABLE USE POLICY for INFORMATION AND COMMUNICATION TECHNOLOGY

Information and Communication Technology (ICT) at Hendon

Hendon Primary School's ICT program provides students with access to a range of computer based learning activities. Students are able to enhance their learning across the curriculum through the use of publishing (e.g., desktop and multimedia) software, organising software (e.g. database and visual planners), calculating software (e.g. spreadsheet) and communication software (e.g. Web browsers, email).

Through Hendon's ICT program students are able to access our Intranet and the Internet. Hendon's Intranet is a collection of programs and files that are stored on our Curriculum Network that can only be accessed from within the school. The Curriculum Network consists of all classroom computers, Resource Centre computers and Computer Lab/Pod computers. Most Intranet resources are stored on the Curriculum Server. This is a dedicated computer that has been set up to control the operation of computers connected to the Curriculum Network and to provide extensive storage .

Why have an Acceptable Use Policy (AUP)?

Expectations regarding student behaviour when using computers are consistent with Hendon's Behaviour Management Policy: This policy places priority on student safety, students communicating appropriately, anti-harassment procedures and respect for property. Students need to understand and accept responsibility for their own behaviour. All expectations regarding behaviour are linked to positive participation in appropriate learning activities.

As with "physical" activities conducted within our school .Hendon's Intranet, as a "virtual" learning environment', can be tailored to minimise risk and maximise safety. In other words we have control over content and interaction. However Hendon provides programs that involve learning conducted outside the school environment. This is a very important part of student development in relation to the local community and beyond. Similarly students have access to the Internet which provides a range of exciting and valuable "global" learning opportunities-As with "physical" excursions these "virtual" excursions outside the school involve increased expectations of student responsibility and extended supervision strategies to ensure safe and appropriate learning in an environment that presents a greater range of options and opportunities.

The aim of our Acceptable Use Policy (AUP) is to • provide students with the greatest range of positive learning opportunities using information and communication technology (ICT).
0 assist students to develop appropriate, responsible and effective strategies for learning using ICT • develop information skills through access to ICT resources that are current, educationally valid and appropriate
0 develop appropriate, effective and safe communication skills using ICT.

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Student Responsibilities:

- Access Hendon's computer network only after gaining permission from a teacher. • Follow teacher instructions at all times when using Hendon's computer network resources.
- Use the Intranet and Internet to support learning and for legal activity,

- Have a clearly defined purpose and plan of action before any Internet or Intranet research task and have it approved by a teacher before starting.
- Ensure that any communication sent via the Intranet or Internet does not contain inappropriate or offensive content.
- Acknowledge the sources of information properly.
- Be courteous and respectful in your messages to others.
- Use appropriate language in any communication.
- Do not degrade or disrupt equipment or system performance.
- Do not gain unauthorised access to resources (download with permission only), • Do not intentionally waste resources or use them carelessly.
- Do not change the data or trespass in the account of another user.
 - Use only your account and password and keep your password private.
- Report immediately to a teacher or system administrator any security problems or information that makes you uncomfortable.
- Do not reveal your home address, image, or phone numbers, or those of other students or colleagues via the Internet or Intranet. Use school addresses and phone numbers only.

Inappropriate Use

The network account holder is held responsible for their actions and activity within their account. Unacceptable uses of the network will result in the suspension or revoking of these privileges or other consequences in line with Hendon's Behaviour Management policy.

I understand and accept my responsibilities and the consequences of my actions when using Hendon's computer network

(Please sign and return to school as soon as possible)

Student's name:

Class Teacher:

Year level:

Student's signature:

Date:

Parent/Care Giver's Signature:

Date:

Child's name:

DOB:

Consent Form – Child/Student

Permission to use image, video, voice, and/or creative work of students and children
The Department for Education develops teaching, learning and promotional materials and publishes them in print and digitally (e.g. on websites and social media accounts). Students also publish their own materials on websites (e.g. school website, department website, Scootle™, iTunes™ or other online environments).

By completing and returning this form, I grant permission for the Department for Education to create/use:

- Photographs, video or audio recordings of my child
- Samples of my child's work
- My child's first name and school/preschool/service name and to distribute them in the following locations:
- Printed publications (eg newsletters, year book, promotional material)
- Secure intranet websites and publicly accessible websites, including social media accounts.

The permission will continue until I revoke permission in writing to the principal of the school, director of the preschool or manager of the service.

Any material placed on publically accessible websites under a Creative Commons licence will be available to download and use. This licence allows for the replication, distribution, display, performance and remixing of copyrighted work, provided that the author is credited.

Notes

- Items might not appear in exactly the form in which they have been submitted and not every item for which permission is granted will be used.
- Items which contain images/references to Aboriginal and Torres Strait Islander people may be accompanied by warning text to indicate that the work may include people who have passed away.
- Where permission is revoked, every effort will be made to remove relevant media from distribution, however this may not be possible or practical in some situations.

Signatures

Additional optional permissions (tick if yes)

- I also grant permission for my child to be photographed/recorded by external media organisations for publication/broadcast.

Name of child/student:

(Full name - please print)

Name of school/service:

Parent/guardian's signatures:

(Parent/guardian to sign)

(Parent/guardian to sign)

Full name of parent(s)/guardian(s):

(please print)

(please print)

Date: _____

Please provide signatures of both parents and/or guardians where possible.

*This form must be filed in a central location at the school 1 | **Consent Form – Child/Student** |*
May 2019



Government of South Australia
Department for Education