



HAPPY CAMPERS KINDY ENROLMENT FORM

Child's Name: _____ (M/F)

Date of Birth: _____

Parents Name: _____

Address: _____

Telephone: Home: _____

Work: _____

Mobile: _____

Email: _____

Please nominate people and provide their full name and telephone number who are authorised to drop off and collect your child and contact in case of emergency:

Name: _____

Address: _____

Telephone: _____

Name: _____

Address: _____

Telephone: _____

Address: _____

Please list any allergies your child has:

Please advise if your child is toilet training:

Please advise us of any other information you feel is relevant in regards to the care and wellbeing of your child:



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Medicare number: _____

Private Health: _____

Custody,
Guardianship or
Access Provisions: _____

Siblings: _____

Please list 3 of your child's main interests/ favourite things.

Please list 2 activities your family enjoy doing most together.

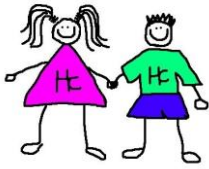
Please list anything special about your child that will help us make sure that their interests and goals are catered for in the program.

Please let us know if there is any special health, religious and cultural considerations we need to be aware of so that we can cater this into your child's program.

How many sessions would you like to enrol and list your day preferences:

Sessions
required: _____

Session		Morning (8.45-12.15)	Full Day (8.45-2.45)
Monday:			
Tuesday:			
Wednesday:			
Thursday:			



HAPPY CAMPERS KINDY

ENROLMENT FORM

We authorise Happy Campers to seek medical attention if required in case of an emergency.

I give / do not give permission for photographs to be taken of my child _____ at Happy Campers. These photos will only be used for display in the centre and in the children's personal portfolios.

I also do / do not give permission for my child's image to very occasionally be used on our Marketing, Facebook and Instagram pages.

We agree to the Terms and Conditions of enrolling our child at Happy Campers

Signature of Parents: _____

Date: _____

Please fill out and return this form along with confirmation non refundable deposit of \$100, copy of MyGov immunisation statement and copy of birth certificate or equivalent document.

Please EFT deposit payment to **Happy Campers account:**

BANK: WESTPAC

ACCOUNT NAME: Townsend & Buck T/A Happy Campers

BSB: 036-034

ACC #: 504615

Please put your child's name in the payment description.

To confirm enrolment please email enrolment form, birth certificate, MyGov immunisation statement and confirmation of deposit to enquiries@happycampersprekindy.com.au

If you have any questions please call Amy 0431 335 560 or email enquiries@happycampersprekindy.com.

Thank you and we look forward to welcoming your child and family to Happy Campers