



MARY MACKILLOP
PENOLA

CONFIDENTIAL STUDENT INFORMATION

Occasional Care Enrolment form

DATE: _____ (Please Print All Information Clearly)

FAMILY NAME: _____ HOME PHONE NO: _____

ADDRESS: _____ MOBILE NO: _____

Residential: _____

Postal: _____

Email: _____

STUDENT HEALTH CARE INFORMATION

**Please use block letters when filling out this form*

Student's Surname	Given Name	Date of Birth

Does your child have any medical condition or other health care concern? Yes/ No

If 'yes' give details below.

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Are you aware of any medical/health care emergency that could arise? Yes/ No

Type of emergency and how to recognise it	
Avoidance Precautions	
Emergency Treatment	

Does your child take any prescribed medication, including inhalers Yes/ No

Medication	Dose	When & How Taken?	Side Effects?

The school actively promotes the use of sunscreen.

Is your child allergic to sunscreen? Yes / No

If yes, please provide details

Emergency Contact and Enrolling Parents and Guardian Information

Name	Relationship	Contact Phone	Alternative Phone

Custody (to be complete if custody is an issue for the family)

Are parents separated or divorced

YES/NO

Do the children have contact with the non-custodial parent?

YES/NO

Is anyone legally denied access to the child?

YES/NO

Who? _____ Custody Number: _____

Is there any additional information regarding separation or custody that Occasional care staff may need to know?

Allergies

Has the child had any allergic reactions?

Foods: _____ Reaction: _____

Medications: _____ Reaction: _____

Other: _____ Reaction: _____

Toileting

Is the child toilet trained and therefore able to utilise toilet facilities? **Yes/No**

Important Information

Please note for the safety of all children,
Photography requires the attending adults to only take pictures that contain their children;
Tea and coffee brought to the playgroup will be in an enclosed mug to prevent burns;
Adults will need to let the playgroup coordinator know when accessing the school's amenities;
Families will be responsible for providing fruit at fruit time for their own children;
Children are to keep footwear on to avoid potential foot injury;
Hats will need to be worn during outdoor play but sunscreen will be available.

By signing this form you understand that it is your responsibility to ensure that your children are supervised at all times during playgroup and in the interest of maintaining a safe environment for all children attending playgroup, the coordinator (a Mandated Notifier) is legally required to report any suspicions of child abuse or neglect.

*“Under section 11(1) and (2) of the Children’s Protection Act 1993, the following people **are obliged by law** to notify the Department if they suspect on reasonable grounds that a child/young person has been or is being abused or neglected and the suspicion is formed in the course of the person’s work (whether paid or voluntary) or in carrying out official duties. **In South Australia, anyone under the age of 18 is classified as a ‘child or young person’.***

The person must notify the Department of that suspicion as soon as practicable after he or she forms the suspicion.”

Declaration

- I declare that any photographs that I take of my children during playgroup will not be placed online.

Signed _____

Parent/Guardian

Parent/Guardian