



Enrolment Form ZigZagZoo Early Learning Centre
Copper Beech Ave, Remarkables Park – please circle
Henry Street, Queenstown – please circle

o Child's Full name: _____

o Date of Birth: ____/____/____ Please provide a copy of your child's Birth Certificate
or Passport and Immunisation Records

o Bookings required:

| Day of Week | Time of Arrival | Time of Departure |
|-------------|-----------------|-------------------|
| Monday | | |
| Tuesday | | |
| Wednesday | | |
| Thursday | | |
| Friday | | |

o Preferred Starting Date: _____

o Parent/Guardian's Names: _____

o Home address: _____

o Home telephone: _____

o Home email address: _____

o Ethnicity: _____

o Iwi affiliation if Māori: _____

o Mother's name, work and address:

o Telephone: _____ Mobile: _____

o Email address: _____

o Father's name, work and address:

o Telephone: _____ Mobile: _____

o Email address: _____

o Other Person/s authorised to collect my child in case of emergency:

o Name: _____

o Address: _____

o Telephone: _____ Mobile: _____

o Preferred primary contact during day:

Mother

Father

Emergency contact

o Most likely daytime phone number: _____

o Family Doctor: _____

o Telephone: _____

o Medical information eg allergies: _____

Policies and Procedures

- o Does your child have any allergies/health problems past or present?

- o Is there any additional information teachers should be aware of? (Religion, routines, language etc.): _____

- o What aspirations do you have for your child?

- o Is there any other person authorised by you, or by a court, to collect or not to collect your child from our centre?

If so, please state name: _____

Address: _____

Authorised to collect

Not authorised to collect

- o Do we have permission to carry out written observations and use digital images of your child for the purposes of programme planning and recording? (Students who enter the centre may wish to observe also.)

YES

NO

- o Do we have permission to include your child's photo, if part of a group story, on Educa (our on-line portfolio system)

YES

NO

- o Do we have your permission to take your child out of the centre on short local outings or walks, the maximum adult/child ratio will be 1 adult to 4 children?

YES

NO

- o Do we have permission for your child to be tested by the Vision Hearing Technician? You will be notified of her visit to the centre?

YES

NO

- We require parents to sign their child in and out of the centre each day they attend.
- Fees are to be paid in advance by automatic payment on the first day of your child's attendance each week, fortnight or month.
- A non-refundable Enrolment Fee of \$30 is payable upon enrolment. This fee covers administrative costs including the Individual Journey of Learning in a book and online for your child, and purchase of your child's bedding, scarf, lunchbox, sunhat etc.
- Your set weekly fee is to be paid for your booked hours regardless of whether your child attends or not. For a maximum of 15 days per child per year 50% fees are charged if your child is absent due to your family's annual holiday.
- Each child has 3 free sick days – that is, no charge if the Centre is notified of their absence due to illness by 8am for the morning session or full day, and 11am for the afternoon session. Full fees apply if no notification is received.
- Information about philosophy, policies, procedures, and a copy of our most recent Education Review Office report can be found in our entrance way. Information about policy and philosophy reviews and consultation processes will be published in our newsletter to parents.
- Information concerning your child will be kept in their Individual Journey of Learning which is available to you at any time. Individual Enrolment Forms will be kept in the office filing cabinet and are available to you on request.

Declaration

- I, _____ undertake to adhere to the requirements and regulations of the ZigZagZoo, Remarkables Park, Queenstown and I also undertake to be responsible for the payment of fees on time. I understand that failure to comply with these requirements and regulations could lead to my child's exclusion from ZigZagZoo, Queenstown.
- I agree and confirm that my child is not enrolled at another Early Childhood Centre at the same times that he/she is enrolled at ZigZagZoo, Queenstown.
- I enclose/have direct credited my \$30 Enrolment Fee into

ACG ECE Group Ltd Acc No 03-0104-0150564-01 (Copper Beach)

ACG ECE Group Ltd Acc No 03-0104-0150564-02 (Henry Street)

Signed Parent/Guardian _____ Date ___ / ___ / ___

Signed ZigZagZoo Manager _____ Date ___ / ___ / ___