



YMCA OSCAR ENROLMENT FORM 2018

YMCA Invercargill
77 Tay St,
Invercargill
Phone: 218 2989 ext 5
027 214 1411
oscar@ymcasouth.org.nz

Child's Information: (ONE PER CHILD PLEASE)

Child's Official Given Name/s:

Other name/s your child is known by:

Primary Home Address:

School of Attendance:

Chosen OSCAR Programme: (please circle)

ST PATRICKS FERNWORTH BREAKFAST CLUB

Date of Birth: _____ Male / Female

Childs Ethnic Origin/s: Iwi your child belongs to: Language/s spoken at home:

Privacy Statement:

We are collecting personal information on this enrolment form for the purposes of providing out of school care for your child.

We will use and disclose this information in accordance with the Privacy act 1993. Under this act you have the right to access and request correction of any personal information we hold about your child.

Details about your child's identity will be shared with the Ministry of Social Development to aid research, statistics and funding.



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Account Holder / Parent / Caregiver Information:

Account/Parent/Caregiver Name: _____
 Relationship to child: _____
 Home Address: _____

 Contact Details: Mobil: _____ Work: _____
 Home: _____
 Email Address: _____

2nd Parent / Caregiver Name: _____
 Relationship to Child: _____
 Home Address: _____

 Contact Details: Mobil: _____ Work: _____
 Home: _____
 Email Address: _____

Emergency contacts and those authorized to collect children other than parents/caregivers:

1st Name: _____
 Contact phone: _____
 Relationship to Child: _____

2nd Name: _____
 Contact phone: _____
 Relationship to Child: _____

3rd Name: _____
 Contact phone: _____
 Relationship to Child: _____



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Custodial Statement:

Are there any custodial arrangements concerning your child? YES or NO

If yes a copy of any court order is required and list person/s who **cannot** pick up your child

1st Name: _____ 2nd Name: _____

3rd Name: _____ 4th Name: _____

Health Information:

Child's Doctor: _____

Doctor's Phone No: _____

Please list any allergies, illnesses, behavioral or special needs your child has: (A request for medical information may be required to be completed) _____

List any medication your child requires (a consent to administrator may be required to be completed):

Category (i) Medicines

A category (i) medicine is a non-prescription preparation (such as arnica cream or antiseptic cream etc) that is not ingested and used for the treatment of minor injuries and provided by the service and kept in the first aid cabinet.

Name/s of specific category (i) medicines that can be used on my child while onsite:

Arnica Cream Betadine Soov Bite Cream Sunblock Calamine Lotion

Parent signature: _____ Date: _____

Category (ii) Medicine/s

A category (ii) medicine/s are prescription (such as antibiotics or eye/ear drops etc) or non-prescription (such as cough syrup or paracetamol liquid etc) medicine that is used for a specific period of time to treat a specific condition or symptom, provided by a parent for the use of that child only or in relation to Rongoa Maori (Maori plant medicines) that is provided by the parents/caregivers

Category (iii) Medicine/s

To be filled in if your child requires medication as part of an individual health plan for example for an on-going condition such as asthma and is for the use of that child only and is provided by the parents/caregiver

Please note:

If our staff are required to administer medications (ii) or (iii) a *Consent to Administer Medication* form must be filled out. NO CHILD will be given medication (ii) or (iii) without prior completion of *Consent to Administer Medication*.



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Booking Information:

This enrolment agreement is exclusive of term breaks and will carry over each term until the end of the year

Is this a **Casual** booking YES / NO (if yes please speak to Team Leader)

Is this a **Regular / Seasonal** booking (please circle)

Please select days and hours required:

Programme: _____

	Monday	Tuesday	Wednesday	Thursday	Friday
Time In					
Time Out					

Programme: _____

	Monday	Tuesday	Wednesday	Thursday	Friday
Time In					
Time Out					

Start Date: _____ End date (if seasonal): _____

Please note:

- **Your booking will continue and charges continued until any changes or cancelation of booking/enrolment is made in writing**
- **All enrolled days will be charged for, including notified absences.**

If changes of bookings are required forms are available from the Team Leader (Tay Street) or from your on-site Supervisor. Until changes are put in writing you will continue to be charged your regular booking

YMCA OSCAR is not open on the following public holidays if they fall on a weekday and no charge is made to parents for public holidays:

New Years Day	Day After News Year Day	Christmas Day	ANZAC Day
Boxing Day	Easter Monday	Good Friday	
Queens Birthday	Waitangi Day	Labour Day	



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IMPORTANT INFORMATION:

How to enroll / Changes to Bookings:

- Complete the registration form attached and deliver to YMCA Invercargill 77 Tay Street or email to oscar@ymcasouth.org.nz.
- **Bookings will be based on "First in first served". All bookings must have completed enrolment forms and other necessary documentation such as request for medical information forms.**
- Once your child / ren are confirmed you will receive confirmation via text / email.
- **Changes to bookings must be in writing, signed and dated.**
- **If a booking/enrolment is to be altered / cancelled, we require 5 days notice in writing or by email.**

Absences:

All absences must be advised as soon as possible to the Team Leader or on-site Supervisor ASAP.

- If an absence is not advised there is an extra charge of a non-notification fee of \$15 per child to cover the unnecessary inconvenience caused to search for the child.

Payment and Charges:

Payments can be made by EFTPOS or cash at 77 Tay Street or through internet banking:

- Westpac, Southland YMCA, 03 1743 0031160 001 (please use Childs name as reference)
- **All enrolled days will be charged for BREAKFAST CLUB \$10.60 – AFTER SCHOOL CARE \$15.90, including notified absences.**
- **If an absence is not advised there is an extra charge of a non-notification fee of \$15 per child to cover the unnecessary inconvenience caused to search for the child.**
- A penalty fee for late pick up of \$10 per child for an extra 10 minutes or part there of and an additional \$1 for every minute after that may be charged to cover extra time of care.
- If your account is overdue and requires debt collection, you the client will be liable for any and all legal collection charges necessary to recover this amount.

WINZ Subsidies:

Subsidies are available from Work and Income NZ for children attending YMCA OSCAR Programmes. Pick up an OSCAR subsidy form WINZ, have it signed off by the OSCAR Team Leader and return to WINZ. For more information please ring WINZ 0800 559 009.

Accident or Injury:

This YMCA OSCAR Programme has been approved under the CYF OSCAR Standards. All care will be taken to provide a safe and well supervised environment for children attending the programme, in accordance with these standards. Although accidents do happen the YMCA will not be liable for accidents, injury or loss/damage to property.

Signing In/Out:

- Sign In will be undertaken by our drivers and / or site supervisors as children arrive at the programme. The parent/caregiver will be asked to sign the child / ren out of the programme.
- It is important that we receive notification of a change in person collecting the child. No child will be released to an unauthorised person.

Policies and Procedures:

A copy of OSCAR policies and procedures and Code of Conduct are available on all of our sites for viewing. These documents include our Service Operation Procedures and Child Protection Policies. If you would like to speak to about our programme/s please ring 218 2989 ext 5



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Transport:

Vehicle transport to and from activities will be in YMCA registered vehicles. All drivers will have current police check, be over the age of 18 and hold a full New Zealand licence.

Parent / Caregiver Declaration

I accept that my child will participate in all activities provided by the staff of YMCA after school care on site unless I have notified in writing otherwise.

I give permission for my child to be transported to the programme and to any outings that may be planned.

I understand the YMCA staff and volunteers will exercise due care but will not be liable for any injury, damage or loss, which my child may sustain to person or property. In the event of sickness or accident I authorise qualified medical attention be secured at my expense. The YMCA will contact me as soon as possible in this event. If my child suffers from any medical condition or has medication to administer I will complete a consent for the OSCAR Supervisor prior to any medication being administered.

I understand that I am required to advise any changes of details on this document as soon as possible to the YMCA in writing at the time of the change taking place.

I, the undersigned, have read, do understand and will comply with the information set out above.

I understand that the information I have provided will be kept confidential and secure, it will only be used by Authorized staff for purposes pertaining to the Oscar programme. The information provided may also be viewed by MSD / CYF on request.

To my knowledge the above information provided in this enrolment form has been checked, all sections have been completed and is correct at the time of enrolment.

Please check that you have signed and dated pages 3, 6 and the media consent on page 7

Signed: _____

Date: _____



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Media Release & Consent Agreement

Overview

It is important that YMCA Invercargill Charitable Trust and its services are able to show the great work that we do in our community. As a part of doing this, we want to be able to use photographs, video footage or audio segments (referred to as media materials) of people involved in our programmes or services. These photos, videos or audio are used in providing reports to funders and in our promotional material.

Therefore, we ask that people provide us with permission to use photographs, video and audio taken while participating in our services. We only request permission to use this media material in our reporting to funders or our promotional material - such as the website or printed documents (news, updates and event promotions).

It is also important that if you do not want your photograph or video of your child to be used, we are aware of this. In such cases please tick the appropriate box below.

Disclosure Consent Statement

I consent to media material taken of my child in the course of participating in YMCA Invercargill programmes and activities being used for reporting to funders and/or publicity material used by the YMCA Invercargill. This may include print, online and social media purposes.

- I give my consent to the use of photographs, video or audio
- I do not give consent to photographs or video of my child being used

I hereby freely and voluntarily grant to Invercargill YMCA Charitable Trust the irrevocable right and permission in respect to photographs, video footage or audio segments it has taken of me, to copyright the same, in its own name, to use and re-use in its reporting to funding agencies and its promotional material.

Childs Full Name: _____

Date of Birth: (DD/MM/YY) ____/____/____

Parent or Caregiver Full Name:

Full Name: _____

Date: _____

Signature: _____