



# BERRIMBA CHILD CARE CENTRE

## INFORMATION UPDATE

**Updated Date:** \_\_\_\_\_

A parent or guardian who has lawful authority in relation to the child must complete this form. A brief explanation of lawful authority is found at the end of this form. The licensed Children's Services must collect the child's enrolment information in this form, as required by the Children's Services Regulation 1998 (Regulations). Question marked with an asterisk \* are not required by Regulations, but you are encouraged to answer these to assist in providing relevant Children Services.

### INFORMATION ABOUT THE CHILD:

**Family Name:** \_\_\_\_\_

**Given Names:** \_\_\_\_\_

**New Home Address:** \_\_\_\_\_

### INFORMATION ABOUT THE CHILDS PARENTS, GUARDIANS OR CARERS:

<b>MOTHER</b>	<b>FATHER</b>
<b>NAME:</b>	<b>NAME:</b>
Address – as per child or:	Address - as per child or:
Telephone/s (H) _____ (W) _____	Telephone/s (H) _____ (W) _____
Mobile:	Mobile:
Does the child live with the Mother? Yes <input type="checkbox"/> No <input type="checkbox"/> (Please tick)	Does the child live with the Father? Yes <input type="checkbox"/> No <input type="checkbox"/> (Please tick)
<b>GUARDIAN</b>	<b>GUARDIAN</b>
<b>NAME:</b>	<b>NAME:</b>
Address – as per child or:	Address - as per child or:
Telephone/s (H) _____ (W) _____	Telephone/s (H) _____ (W) _____
Mobile:	Mobile:
Does the child live with the Mother? Yes <input type="checkbox"/> No <input type="checkbox"/> (Please tick)	Does the child live with the Father? Yes <input type="checkbox"/> No <input type="checkbox"/> (Please tick)

### OTHER PERSONS TO BE NOTIFIED:

There may be times when the child has an accident, injury, trauma or illness and the parents or guardians cannot be contacted. To deal with these situations the Children's Service should notify one of the following people who are authorised to collect and care for the child after the accident, injury, trauma or illness.

<b>NAME:</b>	<b>NAME:</b>
Address:	Address:
Telephone/s (H)_____ (W)_____	Telephone/s (H)_____ (W)_____
Mobile:	Mobile:
Relationship to child:	Relationship to child:

**COLLECTING THE CHILD FROM THE CHILDREN'S SERVICE:**

Please note: For the purpose of using the Berrimba Childcare Centre Bus please see list of Staff below who will be responsible for collection and delivery of your child when using the bus service.

<b>Position</b>	<b>Name</b>	<b>Contact Number</b>
Bus Driver	Graeme Kissell	0409 464 223
Bus Assistant	Karen Firebrace	0409 464 223
Coordinator	Leona Cooper	03 5481 1900
Kindergarten Teacher	Yvonne McKenner	03 5481 1900
Kindergarten Teacher	Joyce Ward	03 5481 1900
Childcare Worker	Jennah Ferris	03 5481 1900
Afterschool Worker	Jess Crothers	03 5481 1900
Childcare Worker	Sharnie Celli	03 5481 1900
Childcare Worker	Karen Kerr	03 5481 1900
Childcare Worker	Cathleen Andrews	03 5481 1900

Your consent is required for other people to collect the Child from the Children's Service on your behalf. Please list the details of those people who can collect the Child in the table below.

In the event that the Child is not collected from the Children's Service and the Parent or Guardians cannot be contacted, this list will also be used to arrange for someone to collect the Child.

**Details of people who can collect the child:** (This list may be added to or changed throughout the year.)

<b>NAME:</b>	<b>NAME:</b>
Address:	Address:
Telephone/s (H)_____ (W)_____	Telephone/s (H)_____ (W)_____
Mobile:	Mobile:

<b>NAME:</b>	<b>NAME:</b>
Address:	Address:
Telephone/s (H)_____ (W)_____	Telephone/s (H)_____ (W)_____
Mobile:	Mobile: