

Bay of Isles Leisure Centre

Crèche Registration



CHILD DETAILS

Child 1

Full Name:

Date of Birth:

Is Your Child Immunised: Yes No

Allergies / Intolerances / Medical Information: Yes No *If yes, please provide details below:*

Provide all necessary information including signs and symptoms.

Child 2

Full Name:

Date of Birth:

Is Your Child Immunised: Yes No

Allergies / Intolerances / Medical Information: Yes No *If yes, please provide details below:*

Provide all necessary information including signs and symptoms.

Child 3

Full Name:

Date of Birth:

Is Your Child Immunised: Yes No

Allergies / Intolerances / Medical Information: Yes No *If yes, please provide details below:*

Provide all necessary information including signs and symptoms.

Child 4

Full Name:

Date of Birth:

Is Your Child Immunised: Yes No

Allergies / Intolerances / Medical Information: Yes No *If yes, please provide details below:*

Provide all necessary information including signs and symptoms.

Staff are not responsible for administering medication and the information provided will be used in case of an emergency. A medical action plan must be provided to crèche if your child has diagnosed asthma, allergy or a relevant medical condition.

PARENT / GUARDIAN DETAILS

Full Name:

Contact Number:

Postal Address:

Residential Address:

Emergency Contact:

Contact Number:

DECLARATION

ACCEPTANCE OF CONDITIONS OF USE

- A ticket obtained from reception must be presented to crèche on entry
- The parent or guardian is required to complete the crèche register. Please inform staff of any special instructions for the care of your child/children.
- Confirm your child's collection time
- A child can not attend for more than 3 hours per session
- A child can not attend for more than 12 hours in a week
- I accept that I must stay on the premises while my child attends the crèche
- I understand that I am at all times responsible for my child while attending crèche
- I understand, if required by staff I must return to my child immediately in crèche
- No sick child/children will be allowed to attend crèche. If a child becomes unwell in crèche, you will be required to return immediately
- I consent to medical treatment being obtained for my child in an emergency

MEMBERSHIP ACCESS POLICY

- Complimentary crèche access only applies to FULL Memberships
- Crèche access only applies Monday to Friday during operating hours of the crèche
- Complimentary access is limited to 2 children per FULL Membership. Children must be immediate family of the member and the adult member must be present at the Bay of Isles Leisure Centre
- Additional children will be charged at regular rates
- Please note that crèche hours may be reduced in holiday periods, staff shortages or prolonged low numbers, with no entitlement to compensation

I GIVE permission for the Shire of Esperance to use my child/children image for such purposes as publicity, illustration, advertising and web content.

Signature

Parent / Guardian

Date

OFFICE USE ONLY

Entered by: (Name & Date)