



ENROLMENT FORM

To Be Completed By Parent(s) or Guardian(s)

Please complete all sections and read the Terms and Conditions of Service attached.

KILLARA PRIMARY ☐ SUNBURY HEIGHTS PRIMARY ☐ SUNBURY WEST PRIMARY ☐ VACATION CARE ☐

CHILDS DETAILS:

Child CRN: _____

Child's Surname: _____ Date of Birth: ____ / ____ / ____

Child's First Names: _____ Preferred Name/Nickname: _____

Please Circle: MALE / FEMALE

Address: _____ State: _____ Postcode: _____

Is the Child of Aboriginal or Torres Strait Island origin (please indicate) ☐ YES ☐ NO

☐ Aboriginal ☐ Torres Strait Island

Does your family come from a diverse cultural background? ☐ YES ☐ NO

Is there anything about your culture that you would like us to know so that we may include this information in our programs or to help with individual needs?

PARENT / GUARDIAN'S DETAILS:

Family CRN: _____

Parent/Guardian 1: _____ Date of Birth: ____ / ____ / ____

Address: _____ State: _____ Postcode: _____

Home Phone: _____ Work Phone: _____ Mobile: _____

Email: _____

Marital Status: _____ Drivers Licence No: _____

Employers Name: _____ Work Address: _____

Email Work: _____ Occupation: _____

Relationship to Child: _____ Statements to be emailed to this Parent/Guardian? ☐ YES

Parent/Guardian 2: _____ Date of Birth: ____ / ____ / ____

Address: _____ State: _____ Postcode: _____

Home Phone: _____ Work Phone: _____ Mobile: _____

Email: _____

Marital Status: _____ Drivers Licence No: _____

Employers Name: _____ Work Address: _____

Email Work: _____ Occupation: _____

Relationship to Child: _____ Statements to be emailed to this Parent/Guardian? ☐ YES

Can you contribute any skills to our centre's program, or have time to volunteer? (e.g. play a musical instrument, speak another language, etc.)

Does the Child live with: ☐ Both Parents ☐ Mother ☐ Father ☐ Guardian

Is access allowed to both Parents? ☐ YES ☐ NO

Custody Court Orders? ☐ YES ☐ NO (if yes, please provide details and copies)

Parenting Orders? ☐ YES ☐ NO (if yes, please provide details and copies)

Parenting Plans? ☐ YES ☐ NO (if yes, please provide details and copies)

AUTHORITY TO COLLECT / EMERGENCY CONTACTS: (do not include Parent/s name/s)

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 by 6:30pm and the Parent/s cannot be contacted, this list will also be used to arrange someone to collect the Child. Please tick the appropriate permissions at the bottom of the table to authorise these people in your absence.

Password: _____

Personal photographic identification (driver's licence, passport, etc.) will be required from the appointed person for collection of your Child on your behalf.

Contact 1	Contact 2
First Name: _____	First Name: _____
Last Name: _____	Last Name: _____
Address: _____ _____	Address: _____ _____
Home Phone: _____	Home Phone: _____
Mobile: _____	Mobile: _____
Work Phone: _____	Work Phone: _____
Relationship to Child: _____	Relationship to Child: _____
Permission to authorize: medical treatment and/or medication <input type="checkbox"/>	Permission to authorize: medical treatment and/or medication <input type="checkbox"/>
Permission to authorize: An educator to take child outside premise <input type="checkbox"/>	Permission to authorize: An educator to take child outside premise <input type="checkbox"/>
Permission to authorize: Signing accident/illness/medication forms <input type="checkbox"/>	Permission to authorize: Signing accident/illness/medication forms <input type="checkbox"/>

CCB & CCMS INFORMATION:

To ensure that you are linked to our centre through the Child Care Managements System (CCMS) and to have Child Care Benefit (CCB) applied to your childcare fees, you must contact Centrelink to confirm that they have the correct name and date of birth for both the Parent and the Child, who are registered for CCB and CCR.

Please complete the following information accurately to ensure that your CRN is linked to Complete Kids Early Learning Centre, and to enable you to receive the CCB and CCR (if applicable):

PERSON REGISTERED FOR CCB WITH CENTRELINK: *(Details must be EXACTLY as Centrelink records)*

Full Name: _____

Date of Birth: ____ / ____ / ____ CRN: _____

CHILD REGISTERED FOR CCB WITH CENTRELINK: *(Details must be EXACTLY as Centrelink records)*

Full Name: _____

Date of Birth: ____ / ____ / ____ CRN: _____

Has this Child attended another Childcare Centre this financial year? ☐ YES ☐ NO

Is the Child attending multiple Childcare Centres? ☐ YES ☐ NO

VERIFICATION OF DETAILS HELD BY CENTRELINK

I confirm that:

1. The information I have provided to Complete Kids Early Learning Centre and Centrelink is true and correct.
2. I am responsible for communicating this information to Centrelink.
3. I am responsible for all fees charged by Complete Kids Early Learning Centre in relation to this enrolment.
4. I understand that if any details are incorrect then full childcare fees are payable by be directly to Complete Kids Early Learning Centre until the details are corrected with Centrelink.

PARENT or GUARDIAN TO SIGN

SIGNED: _____

Name: _____

PARENT or GUARDIAN TO SIGN

SIGNED: _____

Name: _____

OTHER CHILDREN IN CARE / MULTIPLE CHILD CCB PERCENTAGE:

If you have other children who are registered for CCB in another service, please complete the following information to ensure that you have the Multiple Child CCB Percentage applied to your account. As this information may change, we will ask you for updates periodically throughout the year to ensure the correct CCB percentage is applied.

DETAILS OF CHILDREN IN OTHER CHILDCARE SERVICES: *(including Long Day Care/ Before or After School Care)*

Full Name: _____ Date of Birth: ____ / ____ / ____

Full Name: _____ Date of Birth: ____ / ____ / ____

Full Name: _____ Date of Birth: ____ / ____ / ____

Full Name: _____ Date of Birth: ____ / ____ / ____

CHILD'S MEDICAL PRACTITIONER:

Family Doctor's Name: _____

Telephone No: _____ Address: _____

Ambulance Fund: ☐ YES ☐ NO Membership Number _____ Child's Medicare No: _____

ANAPHYLAXIS:

You will be required to provide the service with an individual medical management plan for your child signed by the medical practitioner who is treating your child. This will be attached to your child's enrolment form. More information is available at: www.education.vic.gov.au/anaphylaxis

Has your Child been diagnosed at risk of anaphylaxis? ☐ YES ☐ NO

If yes, you will be provided with a copy of the services anaphylaxis management policy

Does your Child have an auto injection device (e.g. Anapen or EipPen®)? ☐ YES ☐ NO

Has the anaphylaxis medical management plan been provided to the service? ☐ YES ☐ NO

Has a risk management plan been completed by the service in consultation with you? ☐ YES ☐ NO

CHILD MEDICAL AND HEALTH INFORMATION:

Correct medical information regarding your child is extremely important. All medications brought into the centre for administration must be clearly labelled with your child's name. Prescription medications must correspond to the child and dosage recorded on the label. **Parents are not allowed to give permission for medications to be administered for 'when required'.**

ALLERGIES

Does your Child have any allergic reactions? (e.g. foods, medicine, grass, sunscreen, etc.) ☐ YES ☐ NO

If yes, please provide details: _____

Has a risk management plan been completed by the service in consultation with you? ☐ YES ☐ NO

MEDICAL CONDITIONS

Does your Child have any medical conditions and needs (e.g. epilepsy, anaphylaxis, diabetes, asthma, etc.) which are relevant to the children's service? ☐ YES ☐ NO

If yes, please provide your Child's medical action plan: _____

Has a risk management plan been completed by the service in consultation with you? ☐ YES ☐ NO

MEDICAL EMERGENCIES / CONSENT TO ADMINISTER MEDICAL TREATMENT AND MEDICATION

The only persons that can give consent for staff to authorise or administer medical treatment or medication is the child's parents or guardians if appointed by the courts or those listed under Authority to Collect who have been given the appropriate permissions, Authorised to authorise. I give consent for the Approved Provider, Nominated Supervisor or an Educator at Complete Kids to undertake first aid or seek medical assistance or treatment from a registered medical practitioner, hospital or ambulance service that my child should require and consent to transportation of the child by an ambulance service at my expense. In this event every effort will be made to contact the parents / guardians immediately.

I agree to collect or make arrangements for the collection of my child should she/he becomes unwell at the service.

Parent/s / Guardian/s Signature and Name/s

IMMUNISATION DETAILS:

Has your Child been immunised? ☐ YES ☐ NO

To be eligible for Child Care Benefit, your Child must meet the immunisation requirements if they are under the age of seven.

To meet requirements your Child must be:

- Fully immunised or up to date according to the Australian Standard Vaccination Schedule, or
- On a catch-up vaccination schedule, or
- You have an approved exemption for your Child (see below)

Your Child is exempt from the immunisation requirements in the following circumstances:

- You have been told your doctor about the benefits and risks of immunising your Child and you have a conscientious objection to immunising your Child – your Child's doctor or a recognised immunisation provider will need to complete a "Medical Contradiction" form, or
- The Child has a natural immunity to a disease or a vaccine is temporarily unavailable, or
- You or your partner are a member of the Church of Christ Scientist and you have a letter from an official practising member of the Church advising that you are a practising member of the Church.

If yes, please attach a copy of your Child's health record book or immunization statement for confirmation.

(A copy of the immunization statement can be obtained from the Australian Childhood Immunization Register 1800653809 or any Medicare office).

If no, please provide details: _____

Immunisation Record sighted by staff member: _____ Date: ____/____/____

**COMPLETE KIDS WILL REVIEW THESE DETAILS ON A REGULAR BASIS TO ENSURE OUR RECORDS ARE UP TO DATE.
PLEASE KEEP THESE RECORDS UPDATED WHEN YOUR CHILD'S IMMUNISATIONS ARE CARRIED OUT.**

Languages spoken by your Child: _____

Primary language spoken at home: _____

SPECIAL NEEDS:

Does your Child have any special needs/challenging behaviours? ☐ YES ☐ NO

If yes, please provide details: _____

Does your Child regularly visit a specialist? (e.g. speech therapist, etc.) ☐ YES ☐ NO

If yes, please provide details: _____

FOOD / MEALS:

Does your Child have any special dietary needs? (e.g. vegetarian, religious requirements, etc.) ☐ YES ☐ NO

If yes, please provide details: _____

Foods they like: _____

Foods they dislike: _____

Other details: _____

GENERAL NEEDS:

Does/can your Child participate in festivals/celebrations? ☐ YES ☐ NO

If no, please provide details: _____

Does your Child have any fears? (e.g. animals, thunder, trucks, etc.) ☐ YES ☐ NO

If yes, please provide details: _____

CONTRACTED HOURS AND FEES: Please refer to Parent handbook Proposed Start Date: ____ / ____ / ____

DAYS REQUIRED (please circle) please note these are your permanent booked days

BEFORE SCHOOL CARE- MONDAY TUESDAY WEDNESDAY THURSDAY FRIDAY

AFTER SCHOOL CARE- MONDAY TUESDAY WEDNESDAY THURSDAY FRIDAY

BEFORE & AFTER SCHOOL CARE

- EZI DEBIT PAYMENT METHOD IS COMPULSORY FOR ALL FAMILIES USING BEFORE OR AFTER SCHOOL CARE.
- TWO WEEKS NOTICE MUST BE GIVEN IN WRITING BEFORE CEASING CARE OR PAYMENT IN LIEU WILL BE CHARGED.

VACATION CARE

- ALL VACATION CARE FEES NEED TO BE PAID IN ADVANCE.
- PREFERRED METHOD OF PAYMENT IS CREDIT CARD/EZI DEBIT ACCOUNT
- NO REFUNDS ARE GIVEN FOR BOOKINGS THAT ARE NOT ATTENDED, WE ARE UNABLE TO SWAP OR CHANGE DAYS.

INFORMATION FOR BODIES WHICH PROVIDE FUNDING TO THIS SERVICE

From time to time the Department of Education and Early Childhood Development. Seeks information on the characteristics of families who use this children's service. This information is then used in planning new policies, programs and resources to support services. To help us provide accurate information please answer the following questions:

Does the child have a developmental delay/disability including intellectual, sensory or physical impairment? ☐ YES ☐ NO

Does either parent have a disability? ☐ YES ☐ NO

Is this family a single parent family? ☐ YES ☐ NO

PRIVACY ACT

I give the staff /management of Complete Kids Early Learning Centre the authority:

To display information regarding my child's day, routines and birthdays ☐ YES ☐ NO

To check child's hair if there is an outbreak of head lice ☐ YES ☐ NO

To apply sunscreen for outside play ☐ YES ☐ NO

To be observed by staff and students for developmental purposes ☐ YES ☐ NO

Parent/s / Guardian/s Signature and Name/s

COMPLETE KIDS ENROLMENT FORM DECLARATION

I certify that the above information is true and correct. I have read and understand the **TERMS AND CONDITIONS OF SERVICE** (attached) of Just Kids (Aust) Pty Ltd T/A Complete Kids Early Learning Centre which form part of, and are intended to be read in conjunction with this Enrolment Form and agree to be bound by these conditions. I authorise the use of my personal information as detailed in the Privacy Act clause therein.

Guarantee

If I execute this agreement as the person responsible for payment on behalf of the Parent, I guarantee the due and punctual payment of all monies payable under this agreement. This Guarantee and Indemnity shall constitute an unconditional and continuing guarantee and indemnity and accordingly shall be irrevocable and remain in full force and effect until the whole of moneys owing to Complete Kids by the Parent and all obligations herein have been fully paid satisfied and performed.

PARENT or GUARDIAN TO SIGN

SIGNED: _____

Name: _____

ID: _____ Date of Birth: _____
(Driver's Licence, Passport, etc.)

Date: _____

PARENT or GUARDIAN TO SIGN

SIGNED: _____

Name: _____

ID: _____ Date of Birth: _____
(Driver's Licence, Passport, etc.)

Date: _____

WITNESS TO COMPLETE/SIGN:

SIGNED: _____

Full Name: _____

Occupation: _____

Address: _____

ID: _____ Date of Birth: _____
(Driver's Licence, Passport, etc.)

Date: _____

GUARANTOR'S DETAILS (if required):

SIGNED: _____

Full Name: _____

Occupation: _____

Address: _____

ID: _____ Date of Birth: _____

Date: _____

COMPLETE KIDS TO SIGN:

SIGNED: _____

Name: _____

Position: _____

Date: _____

Just Kids (Aust) Pty Ltd T/A Complete Kids Early Learning Centre – Terms & Conditions of Trade

1. Definitions

- 1.1 "Complete Kids" means Just Kids (Aust) Pty Ltd T/A Complete Kids Early Learning Centre, its successors and assigns or any person acting on behalf of and with the authority of Just Kids (Aust) Pty Ltd T/A Complete Kids Early Learning Centre.
- 1.2 "Parent" means the person/s (legal guardian (or guardians) of the Child) requesting Complete Kids to provide the Services as specified in any invoice, document or order, and if there more than one person requesting the Services is a reference to each person jointly and severally.
- 1.3 "Child" shall mean the Child enrolled with Complete Kids.
- 1.4 "Guarantor" means either the person (or persons) or entity who agrees herein to be liable for the debts of the Parent on a principal debtor basis.
- 1.5 "Services" means all services supplied by the Centre to the Parent and includes any advice or recommendations, and includes any advice or recommendations.
- 1.6 "Fee" shall mean the cost of the Services as agreed between Complete Kids and the Parent, subject to clause 4 of this contract.

2. Acceptance

- 2.1 The Parent is taken to have exclusively accepted and is immediately bound, jointly and severally, by these terms and conditions if the Parent accepts Services provided by Complete Kids.
- 2.2 These terms and conditions may only be amended with Complete Kids' consent in writing and shall prevail to the extent of any inconsistency with the *Enrolment Form*, *Parent Handbook*, *Fee Policy*, any other document or agreement between the Parent and Complete Kids.

- 2.3 None of Complete Kids' employees, agents or representatives are authorised to make any representations, statements, conditions or agreements not expressed by the Director of Complete Kids in writing, nor is Complete Kids bound by any such unauthorised statements.
- 2.4 The Parent acknowledges and accepts that Complete Kids shall not use physical punishment in the discipline of the Child or in managing the Child's behaviour.
- 3. Change in Control**
- 3.1 The Parent and/or Guarantor shall give Complete Kids not less than fourteen (14) days prior written notice of any proposed change in the payment arrangements and/or any change (in circumstances from) to the details as outlined in the **Enrolment Form**; including, but not limited to, change of name, address, contact phone or fax number/s, or the living arrangements of the Child and/or Parent. The Parent shall be liable for any loss incurred by Complete Kids as a result of the Parent's failure to comply with this clause.
- 4. Fees and Method of Payment**
- 4.1 At Complete Kids' sole discretion the Fee shall be as indicated:
- (a) on the Enrolment Form or specified, in respect of Services provided, and charged at the current rate per day; or
- (b) on any invoice provided by Complete Kids to the Parent.
- 4.2 At Complete Kids' sole discretion:
- (a) a non-refundable deposit of fifty dollars (\$50.00) per family is payable upon enrolment; and
- (b) an advance on the Fees (equal to two (2) full weeks of Fees) shall be required for each Child.
- 4.3 Fees remain payable in full where the Child is absent through illness, where the Child is on holiday, or for any other reason.
- 4.4 At Complete Kids' sole discretion, a late fee shall be charged where the Parent collects the Child outside the contracted hours (as stipulated in the **Enrolment Form**), regardless of circumstances. Subject to review, the late fee is two dollars (\$2.00) for every minute late, per Child. Late drop off does not constitute late collection. If the Child is collected earlier than the stated contractual time, the full Fees shall still be applicable.
- 4.5 The childcare benefit is also available to a Parent through an application to the Family Assistance Office. It is the responsibility of the Parent to claim from the Family Assistance/Medicare Office and to provide the Centre their Customer Reference Number (CRN) and healthcare record of the Child, even where the family will not be claiming a Child Care Benefit as reduced Fees on a weekly basis. The Centre's paid in full invoice must be signed by the Centre.
- 4.6 Payment may be made by cash, cheque, bank cheque, electronic/on-line banking, credit card (plus a surcharge of up to two and a half percent (2.5%) of the Fees), Ezidebit, or by any other method as agreed to between the Parent and Complete Kids.
- 4.7 Unless otherwise stated the Fees do not include GST. In addition to the Fees the Parent must pay to Complete Kids an amount equal to any GST Complete Kids must pay for any supply of Services by Complete Kids under this or any other agreement. The Parent must pay GST, without deduction or set off of any other amounts, at the same time and on the same basis as the Parent pays the Fee. In addition the Parent must pay any other taxes and duties that may be applicable in addition to the Fees except where they are expressly included in the Fees.
- 4.8 Receipt by Complete Kids of any form of payment other than cash shall not be deemed to be payment until that form of payment has been honoured, cleared or recognised. Complete Kids shall issue a receipt to the Parent upon payment.
- 5. Provision of Services**
- 5.1 The Parent acknowledges that any personal property (including, but not limited to, clothing, toys and other items) must be marked with the Child's name. Complete Kids accept no responsibility for any loss or damage to personal property.
- 5.2 The Parent acknowledges that occasionally Complete Kids will have the opportunity to go on trips further afield. Complete Kids will inform the Parent beforehand and will give the Parent the opportunity for the Child to participate, in which the Parent will be required to fill in a consent form. Occasionally, a fee will be required for transport, entrance fees and any other applicable charges
- 5.3 Both parties agree that they shall make every endeavour to enable the Services to be supplied at the time and place as was arranged between both parties. In the event that Complete Kids is unable to supply the Services as agreed solely due to any action or inaction of the Parent then Complete Kids shall be entitled to charge a reasonable fee for re-supplying the Services at a later time and date.
- 6. Persons to Collect a Child**
- 6.1 The Child may be released into the care of either the Parent, Guardian, or a responsible person aged sixteen (16) years or over, into whose care a custodial Parent has signed permission for the Child to be released. This may include persons nominated as emergency contacts, persons nominated on the **Enrolment Form** to collect the Child, or persons nominated to collect the Child on specific occasions.
- 6.2 The person collecting the Child (other than the Parent) may be required to produce proof of identity to satisfy Complete Kids of their bona fides before the Child will be released.
- 6.3 Complete Kids staff will not be responsible for the removal of a child from Complete Kids by a non-custodial Parent or other person, however they will do all in their power to prevent this. In such a case, Complete Kids staff will make every effort to contact the custodial Parent and Police.
- 7. Absences and Illness**
- 7.1 It is the responsibility of the Parent to:
- (a) inform Complete Kids if the Child has been ill within twenty-four (24) hours prior to intended attendance. Complete Kids shall be entitled to decide whether or not to accept the sick Child for care; and
- (b) advise Complete Kids if a Child is to be absent (other than illness) as soon as possible; and

- (c) provide Complete Kids with at least two (2) weeks notice of annual leave; and inform Complete Kids of the estimated length of the Child's absence from Complete Kids.
- 7.2 A Child will not be able to attend Complete Kids for any period of time during which:
- (a) the Child is suffering from a disease or condition which is contagious through normal social contact; or
 - (b) a medical practitioner has recommended the Child not attend; or
 - (c) the Director of Complete Kids requests that the sick Child be kept away from Complete Kids because the Child requires care which Complete Kids staff resources do not provide.
- 8. Emergency Contacts**
- 8.1 The Parent must provide Complete Kids with the names and addresses of two (2) responsible persons over the age of eighteen (18) who can collect the Child in case of an emergency or illness. When contacted by Complete Kids Director or their delegate, the Parent (or a responsible person authorised by the Parent) must go immediately to Complete Kids to collect the sick or injured Child.
- 9. Medication**
- 9.1 Where the Child requires the administration of medication, the Parent will provide:
- (a) written permission for Complete Kids to administer the medication; and
 - (b) the correct medication in its original container, and clearly labelled with the Child's name; and
 - (c) written instructions from a medical practitioner for the administration of non-prescription medication; and
 - (d) Complete Kids staff with the name and contact phone number of the Child's doctor.
- 9.2 Complete Kids staff are authorised to administer medication only in accordance with the Parents written authority. In doing so, Complete Kids staff are to be regarded as acting as the Parent's agent. Staff are not liable for any allergic reaction or injury caused to the Child by the administration of the medication in accordance with the Parents written authority. Nor will they be responsible for any error contained in the written permission, or the supply of incorrect medication by the Parent.
- 9.3 The Parent will notify Complete Kids of any changes or developments in the Child's medical history.
- 10. Accident or Emergency**
- 10.1 Whilst every reasonable effort shall be made by Complete Kids to contact the Parent in the event of an accident or emergency, the Parent hereby gives authority to the Director or their delegate to, on behalf of the Parent, authorise the administration of medication, transportation to hospital and administration of treatment as is recommended by the Child's doctor, any attending doctor, ambulance officer, police or Government Officer.
- 10.2 The Parent will be responsible for any costs incurred as a result of transportation or treatment.
- 11. Notification of Child Abuse**
- 11.1 By law, Complete Kids staff are mandatory reporters, and as such, are obliged to report any suspected incidents of child abuse or mistreatment to the appropriate local authority.
- 12. Court Action**
- 12.1 Should the Child be the subject of any court action, particularly custody or access issues, being heard before the Courts, Complete Kids shall not allow staff to issue statements or provide reports regarding the Child, except where instructed to do so by the Court itself.
- 13. Intellectual Property**
- 13.1 Where Complete Kids has designed, drawn, written, or created educational systems, techniques and curriculum in relation to the Child, then the copyright in those designs, drawings, documents, systems, techniques and curriculum shall remain vested in Complete Kids, and shall only be used by the Parent at Complete Kids' discretion.
- 14. Quality Assurance**
- 14.1 Unless expressly requested otherwise in writing, the Parent permits Complete Kids to photograph or video record the Child for quality assurance, promotional or marketing purposes, to be used within Complete Kids (as well as on the Complete Kids Website), and local and national newspaper stories.
- 15. Complaints Policy**
- 15.1 The Parent shall be entitled to report any concern they may have in relation to the Services, any matters of safety, care or quality of education, or where the Parent wishes to make a suggestion. These shall be addressed with the Director of Complete Kids, where in most incidences the issue can be rectified.
- 16. Default and Consequences of Default**
- 16.1 Interest on overdue invoices shall accrue daily from the date when payment becomes due, until the date of payment, at a rate of two and a half percent (2.5%) per calendar month (and at Complete Kids' sole discretion such interest shall compound monthly at such a rate) after as well as before any judgment.
- 16.2 If the Parent owes Complete Kids any money the Parent shall indemnify Complete Kids from and against all costs and disbursements incurred by Complete Kids in recovering the debt (including but not limited to internal administration fees such as late payment fees, legal costs on a solicitor and own client basis, contract default fees, and bank dishonour fees).
- 16.3 Without prejudice to any other remedies Complete Kids may have, if at any time the Parent is in breach of any obligation (including those relating to payment) under these terms and conditions Complete Kids may suspend or terminate the supply of Services to the Parent. Complete Kids will not be liable to the Parent for any loss or damage the Parent suffers because Complete Kids has exercised its rights under this clause.
- 16.4 Without prejudice to Complete Kids' other remedies at law Complete Kids shall be entitled to cancel all or any part of any order of the Parent which remains unfulfilled and all amounts owing to Complete Kids shall, whether or not due for payment, become immediately payable if:
- (a) any money payable to Complete Kids becomes overdue, or in Complete Kids' opinion the Parent will be unable to make a payment when it falls due;

- (a) the Parent becomes insolvent, convenes a meeting with its creditors or proposes or enters into an arrangement with creditors, or makes an assignment for the benefit of its creditors; or
- (b) a receiver, manager, liquidator (provisional or otherwise) or similar person is appointed in respect of the Parent or any asset of the Parent.

18. Termination of Enrolment

- 18.1 Complete Kids may cancel these terms and conditions or terminate the Child's enrolment at any time by giving written notice to the Parent. Complete Kids shall not be liable for any loss (including, but not limited to, loss of income) arising from such termination.
- 18.2 If the Child is to be withdrawn from care, the parent is to give Complete Kids two (2) week's notice in writing. If the Child does not attend Complete Kids during this period, no refund of the advance fee will be made. If a child is withdrawn without notice, the advance fee will be forfeited.
- 18.3 Notice of withdrawal will be accepted during Complete Kids' standard operating hours, and is effective from the date it is lodged with Complete Kids.

19. Privacy Act 1988

- 19.1 The Parent and/or Guarantor agrees for Complete Kids to obtain from a credit reporting agency a credit report containing personal credit information about the Parent and/or Guarantor in relation to credit provided by Complete Kids.
- 19.2 The Parent and/or Guarantor agrees that Complete Kids may exchange information about the Parent and/or Guarantor with those credit providers either named as trade referees by the Parent and/or Guarantor or named in a consumer credit report issued by a credit reporting agency for the following purposes:
 - (a) to assess an application by the Parent; and/or
 - (b) to notify other credit providers of a default by the Parent and/or Guarantor; and/or
 - (c) to exchange information with other credit providers as to the status of this credit account, where the Parent and/or Guarantor is in default with other credit providers; and/or
 - (d) to assess the creditworthiness of the Parent and/or Guarantor.The Parent and/or Guarantor understands that the information exchanged can include anything about the Parent and/or Guarantor's creditworthiness, credit standing, credit history or credit capacity that credit providers are allowed to exchange under the Privacy Act 1988.
- 19.3 The Parent and/or Guarantor consents to Complete Kids being given a consumer credit report to collect overdue payment on commercial credit (Section 18K(1)(h) Privacy Act 1988).
- 19.4 The Parent and/or Guarantor agrees that personal credit information provided may be used and retained by Complete Kids for the following purposes (and for other purposes as shall be agreed between the Parent and/or Guarantor and Complete Kids or required by law from time to time):
 - (a) the provision of Services; and/or
 - (b) the marketing of Services by Complete Kids, its agents or distributors; and/or
 - (c) analysing, verifying and/or checking the Parent and/or Guarantor's credit, payment and/or status in relation to the provision of Services; and/or
 - (d) processing of any payment instructions, direct debit facilities and/or credit facilities requested by the Parent and/or Guarantor; and/or
 - (e) enabling the daily operation of Parent's account and/or the collection of amounts outstanding in the Parent's account in relation to the Services.
- 19.5 Complete Kids may give information about the Parent and/or Guarantor to a credit reporting agency for the following purposes:
 - (a) to obtain a consumer credit report about the Parent and/or Guarantor;
 - (b) allow the credit reporting agency to create or maintain a credit information file containing information about the Parent and/or Guarantor.
- 19.6 The information given to the credit reporting agency may include:
 - (a) personal particulars (the Parent and/or Guarantor's name, sex, address, previous addresses, date of birth, name of employer and driver's licence number);
 - (a) details concerning the Parent and/or Guarantor's application for credit or commercial credit and the amount requested;
 - (b) advice that Complete Kids is a current credit provider to the Parent and/or Guarantor;
 - (c) advice of any overdue accounts, loan repayments, and/or any outstanding monies owing which are overdue by more than sixty (60) days, and for which debt collection action has been started;
 - (d) that the Parent and/or Guarantor's overdue accounts, loan repayments and/or any outstanding monies are no longer overdue in respect of any default that has been listed;
 - (e) information that, in the opinion of Complete Kids, the Parent and/or Guarantor has committed a serious credit infringement (that is, fraudulently or shown an intention not to comply with the Parent and/or Guarantor's credit obligations);
 - (f) advice that cheques drawn by the Parent and/or Guarantor for one hundred dollars (\$100) or more, have been dishonoured more than once;
 - (g) that credit provided to the Parent and/or Guarantor by Complete Kids has been paid or otherwise discharged.

2. General

- 2.1 The failure by Complete Kids to enforce any provision of these terms and conditions shall not be treated as a waiver of that provision, nor shall it affect Complete Kids' right to subsequently enforce that provision. If any provision of these terms and conditions shall be invalid, void, illegal or unenforceable the validity, existence, legality and enforceability of the remaining provisions shall not be affected, prejudiced or impaired.
- 2.2 These terms and conditions and any contract to which they apply shall be governed by the laws of Victoria, the state in which Complete Kids has its principal place of business, and are subject to the jurisdiction of the Melbourne Courts in that state.

- 2.3 Complete Kids shall be under no liability whatsoever to the Parent for any indirect and/or consequential loss and/or expense (including loss of profit) suffered by the Parent arising out of a breach by Complete Kids of these terms and conditions (alternatively Complete Kids' liability shall be limited to damages which under no circumstances shall exceed the Fees for the Services).
- 2.4 The Parent shall not be entitled to set off against, or deduct from the Fees, any sums owed or claimed to be owed to the Parent by Complete Kids nor to withhold payment of any invoice because part of that invoice is in dispute.
- 2.5 Complete Kids may license or sub-contract all or any part of its rights and obligations without the Parent's consent.
- 2.6 The Parent agrees that Complete Kids may amend these terms and conditions at any time. If Complete Kids makes a change to these terms and conditions, then that change will take effect from the date on which Complete Kids notifies the Parent of such change. The Parent will be taken to have accepted such changes if the Parent makes a further request for Complete Kids to provide Services to the Parent.
- 2.7 Neither party shall be liable for any default due to any act of God, war, terrorism, strike, lock-out, industrial action, fire, flood, storm or other event beyond the reasonable control of either party.
- 2.8 The Parent warrants that it has the power to enter into this agreement and has obtained all necessary authorisations to allow it to do so, it is not insolvent and that this agreement creates binding and valid legal obligations on it.

LOCAL EXCURSION PERMISSION FORM

Complete Kids will provide age appropriate excursions/ incursions/ specialist activities as part of the planned program and to be an integral part of the Centre as they provide variety which adds to children's life experiences.

During the year we cover a range of various topics within our program, based on the interests of the children. Most of the time, these topics can be explored in the classroom, however sometimes staff may wish to conduct local excursions, such as a walk to the park, a visit to the school, to the post box or a visit to local shops to enhance the children's learning and development.

Information outlining full details of each Excursion is available for your perusal on request. On each excursion we will carry a first aid kit, emergency contact numbers for families, a mobile phone and walkie talkies. We ensure that at least one Educator has an appropriate First Aid Certificate.

Child's Name: _____ **Room** _____

As the parent/guardian for the above listed child/ren I give my consent for him/her to participate in local excursion activities and agree to delegate my authority to the staff and educators associated with the excursion. I understand the Director has checked all planning and safety measures and a risk assessment has been completed. I understand the local excursions DO NOT involve transport.

MEDICAL EMERGENCIES / CONSENT TO ADMINISTER MEDICAL TREATMENT AND MEDICATION

The only person that can give consent for staff to authorise or administer medical treatment or medication is those with 'lawful authority' meaning the child's parents or guardians if appointed by the courts or those listed under Authority to Collect who have been given the appropriate permissions. I give consent for the Approved Provider, Nominated Supervisor or an Educator at Complete Kids to undertake first aid or seek medical assistance or treatment from a registered medical practitioner, hospital or ambulance service that my child should require and consent to transportation of the child by an ambulance service at my expense. In this event every effort will be made to contact the parents / guardians immediately. In the event of an accident or illness, I authorise the teacher in charge of the excursion, to consent, where it is impracticable to communicate with me, to my child receiving such medical or surgical treatment that may be deemed necessary.

Parent Name: _____

Signed: _____ **Date:** _____

Parent Phone Number: _____

Emergency Contact 1: *(Please complete Full name, contact number and relationship to child)*

Emergency Contact 2: *(Please complete Full name, contact number and relationship to child)*

Medicare number:

Private health cover?



CHILDREN'S PHOTOGRAPHY & MULTI MEDIA CONSENT FORM

Complete Kids seeks your consent to use photographic and digital images, videos/audio recordings and or work samples taken from your child for use in the following ways- Newsletters, Flyers, Publications, Websites, Social Media Platforms, other related methods of promotion, any future editions and variations of the above, and both electronic and printed formats of the above.

Images of children are used at Complete Kids to:

- Document learning and progress
- Celebrate children's accomplishments/milestones
- Promote the service and events held

In accordance with The Information Privacy Act Complete Kids seeks permission to use student images. I acknowledge that I-

- Am the parent/guardian and have the legal capacity to give consent
- Understand that Complete Kids does not guarantee that any photographs, digital images, work samples of the child listed below will necessarily be used
- Consent to the publication, by Complete Kids, of photos, digital images, recording or work samples of my child listed below for the purpose with any reasonable retouching or alteration
- Understand that Complete Kids will make every effort to respect my child's moral dignity
- Consent to Complete kids copying & distributing images, recordings, work samples of my child listed below in whole or in part as they deem appropriate for the agreed purpose
- Consent to high volume promotional items including but not limited to brochures, posters, publication covers, websites for a duration of 5 years (or longer)

I authorise Complete Kids Service and it's Early Childhood Educators to take and use any photographs, video or sound recordings of my child and any other reproductions or adaptations of my child's likeness (the material), either in full or in part, in conjunction with any wording or artworks for the following purposes (please tick all that apply):

- ☐ Within the Child's Room
- ☐ Within the Centre
- ☐ Within the Centre's Newsletters
- ☐ To share with other families
- ☐ On the Centre's website
- ☐ On the Centre's Tiqbiz App
- ☐ On the Centre's Instagram Page
- ☐ On the Centre's Facebook Page
- ☐ Within promotional materials

☐ Within the media Authorisation (video & sound recordings of my child and any other reproductions or adaptations of my child's likeness)

☐ I do not give permission for my child's photograph, name or work to be published in any form of media by Complete Kids Service. Comment:

I understand that the above forms of media may be accompanied by my child's first name and up to the first three initials of their last name (in the event of 2 children having the same first name).

I _____ (print full name) hereby consent to photographic & digital images and/or visual recordings and/ or work samples of my child _____ (print full name) Being used by Complete Kids for the purposes described above.

Name: _____ Phone Number _____

Signed: _____ Date: _____

I understand that it is my responsibility to update this form in the event that I no longer wish to authorise one or more of the above uses. I agree that this form will remain in effect during the term of my child's enrolment.

Name: _____ Signature _____

ALL ABOUT ME

First Name _____

Surname _____

I prefer to be called _____

Today's date ____/____/____ Date of birth ____/____/____

Sex: Male Female

Grade _____ Class room _____

Teacher _____

My favourite colour is _____ My favourite Food is _____

My favourite book is _____ My favourite song is _____

My favourite animal is _____ My favourite toy is _____

My favourite website is _____ My favourite place is _____

My favourite sport is _____ My favourite game is _____

My favourite T.V channel is _____ My favourite movie is _____

In my spare time I enjoy _____

Things that make me feel happy are _____

I feel relaxed and calm when _____

I don't like _____

My family.....

I live at home with- Mum/ Dad/ Grandparents/ Aunty/ Uncle (please circle)

My families' names are _____

Favourite thing to do with your family _____

Do your family member have any special talents they can share _____



ACN 096 902 813, AFSL 315388

YOUR DETAILS- Please complete this form using a BLACK PEN *Indicates a MANDATORY FIELD**BUSINESS:** Just Kids (AUST) Pty Ltd T/as Complete Kids ABN/CAN 84 109 826 039

CUSTOMER REFERENCE:

*SURNAME.....*GIVEN NAME.....

*MOBILE.....*EMAIL.....

*ADDRESS.....

*SUBURB.....*STATE.....*POSTCODE.....

DEBIT ARRANGEMENT Including payment details and associated fees/charges detailed below and/or the total amount billed for the specified period for this and any other subsequent agreements or amendments between me/us and the business and/or Ezidebit

I/We authorise and request Ezidebit Pty Ltd CAN 096 902 813 (User ID 165969) ("Ezidebit") to debit payments from my/our account, as specified below, at intervals and amounts as directed by Just Kids (Aust) Pty Ltd T/as Complete Kids. ("The Business") as per Terms and Conditions of my agreement with the Business and in accordance with this Direct Debit Request and the Ezidebit DDR Service Agreement

(Ver 1.3)

Administration Fee
(once only)Paid by
BusinessBank Account
Transaction Fee:Paid by
BusinessCredit Card
Transaction Fee:VISA/Mastercard 2.2% (Min \$0.88)
Diners: 4.4% (Min \$0.88)**CHOOSE YOUR PAYMENT METHOD**☐ DEBIT FROM CREDIT CARD☐ VISA☐ MasterCard☐ Diners

MM/Year

Card number.....Expiry Date

Name of Card Holder.....

By signing this form, I/We authorise Ezidebit, acting on behalf of the Business, to debit payments from my specified Credit Card above, and I/We acknowledge that Ezidebit will appear as the merchant on my credit card statement. Furthermore, I/We agree to reimburse and indemnify Ezidebit for any successful claims made by the Card Holder through their financial institution against Ezidebit.

☐ DEBIT FROM BANK, BUILDING SOCIETY or CREDIT UNION ACCOUNT

Financial

Institution:.....Branch:.....

BSB Number:.....Account Number:.....

Account Holder

Name.....

I/We authorise Ezidebit Pty Ltd ACN 096 902 813 (User ID No 165969) to debit my/our account at the Financial Institution identified above through the Bulk Electronic Clearing System (BECS) in accordance with the Debit Arrangement stated above and this Direct Debit Request and as per the Ezidebit DDR Service Agreement (Ver 1.3) provided.

This Authorisation is to remain in force in accordance with the terms and conditions on this Direct Debit Request, the provided Ezidebit DDR Service Agreement (Ver 1.3) and I/We have read and understand same.

Signature (s) of

Date / /

Nominated Account

Preferred Payment Day (please circle) MON TUES WED THURS FRI Payment Start Date / / ...

Payment Cycle (please circle) WEEKLY FORTNIGHTLY