



Bizzy Kidz Childcare Ltd  
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Mangere Bridge  
Auckland 2022  
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Web: www.bizzykidzchildcare.co.nz

**PLEASE NOTE THAT COMPLETING THIS FORM DOES NOT GUARANTEE YOUR CHILD A PLACE AT BIZZY KIDZ. IT PLACES YOUR CHILD ON THE WAITING LIST. THANK YOU.**

**CHILD DETAILS**

Official Surname or Family Name: .....

Official Given Name/s: .....

Official other names/middle names: .....

Preferred Name/s: ..... Date of Birth: .....

Place of Birth: ..... Religion: .....

Ethnicity: (this is required for Ministry of Education Statistics) .....

Iwi/s (if known): .....

Male/Female..... Language/s spoken at home: .....

Primary residential address (including postcode): .....

.....

Doctor: ..... Phone: ..... Address: .....

Other Specialist: ..... Phone: .....

Special Needs: yes/no .....

Immunisations up to date: yes/no .....

Allergies: yes/no .....

Medical Conditions: yes/no .....

Medications: yes/no .....

Special Dietary needs: yes/no .....

.....

Childhood diseases already had: (eg chicken pox, measles): .....

: .....

Sleep time/s and comforters: .....

**IDENTIFICATION SIGHTED & COPIED (tick one)**

NZ Passport Foreign Passport Other

NZ Birth Certificate Foreign Birth Certificate

Staff Initials .....

**IMMUNISATIONS: Please provide a copy of child's immunisation record (Plunket book)**

**OTHER CHILDREN LIVING WITH CHILD (e.g. brother/sister/cousin)**

First Name/s: ..... Family Name: .....

Relationship to Child: ..... Date of Birth: .....

First Name/s: ..... Family Name: .....  
 Relationship to Child: ..... Date of Birth: .....  
 First Name/s: ..... Family Name: .....  
 Relationship to Child: ..... Date of Birth: .....

**GUARDIAN DETAILS**

First Name/s: ..... Family Name: .....  
 Date of Birth: ..... Religion: ..... Relationship to Child: .....  
 Home address: .....  
 Work Name: ..... Work Address: .....  
 Mobile: ..... Home Phone: ..... Work Phone: .....  
 Email Address: .....

**GUARDIAN DETAILS**

First Name/s: ..... Family Name: .....  
 Date of Birth: ..... Religion: ..... Relationship to Child: .....  
 Home address: .....  
 Work Name: ..... Work Address: .....  
 Mobile: ..... Home Phone: ..... Work Phone: .....  
 Email Address: .....

**Other than above named guardians, I authorise the following person/s to collect my child:**

Name: ..... Relationship to child: .....  
 Name: ..... Relationship to child: .....  
 Name: ..... Relationship to child: .....

Are there any custodial arrangements concerning your child: .....  
 Names of people who are forbidden by law to have access to my child or have access with conditions: .....

**EMERGENCY CONTACT DETAILS**

Name: ..... Relationship to child: ..... Phone:.....  
 Name: ..... Relationship to child: ..... Phone:.....  
 Name: ..... Relationship to child: ..... Phone:.....

**ENROLMENT DETAILS**

Date of Enrolment: ..... Date of entry: ..... Date of exit: .....

| Days enrolled                   | Monday | Tuesday | Wednesday | Thursday | Friday | Total hours |
|---------------------------------|--------|---------|-----------|----------|--------|-------------|
| Times enrolled                  |        |         |           |          |        |             |
| 20 Hours ECE at this service    |        |         |           |          |        |             |
| 20 Hours ECE at another service |        |         |           |          |        |             |

**Dual Enrolment Declaration**

I hereby declare that my child **is/is not** enrolled at another Early Childhood institution at the same times that he/she is enrolled at Bizzy Kidz Childcare.

Parent/Guardian Signature:..... Date: .....

**20 Hours ECE Attestation**

Is your child receiving 20 Hours ECE for up to 6 hours per day, 20 hours per week at this service?  
Yes / No

Is your child receiving 20 Hours ECE at any other services? Yes / No

If yes to either or both of the above, please sign to confirm that:

- your child does not receive more than 20 hours of 20 Hours ECE per week across all services.
- you authorise the Ministry of Education to make enquires regarding the information provided in the Enrolment Agreement Form, if deemed necessary, and to the extent necessary to make decisions about your child’s eligibility for 20 Hours ECE
- you consent to the early childhood education service providing relevant information to the Ministry of Education, and to other early childhood education services your child is enrolled at, about the information contained in this box.

Parent/Guardian Signature: ..... Date: .....

**DECLARATION**

I agree for my child to be taken on walks in the vicinity of the centre.

I agree that my child may be given non-prescription medication (e.g. arnica, insect bite treatment) by staff for minor incidents/accidents.

Statutory Holidays/Term Breaks: This centre is closed on statutory holidays. I understand that this enrolment agreement is inclusive of school term breaks.

Optional Charges: This centre does not charge optional charges.

I agree for my child to be taken to the local doctor / hospital in the case of an emergency and to pay any medical costs.

I have read, understand and agree to abide by the child protection, child behaviour, trips and sleep policies.

I have had access to and read all other centre policies. I agree to abide by these policies. I understand I will be consulted about any changes to these policies.

I understand that my child will be included in the centre’s planning and evaluation process and that their first name may be used in observations.

I agree that my child can be included in any photos, videos and audiotapes taken by the centre for the purposes of planning and evaluation. I give permission for my child’s photograph to be taken for publicity and educational purposes.

I have agreed to pay the following Fees: .....

I declare that all the above information is true and correct to the best of my knowledge.

Guardian Name/s & Signature/s: ..... Date: .....

On behalf of Bizzy Kidz Childcare, I declare that this form has been checked and all relevant sections have been completed.

Name & Signature: .....Date: .....

**Please see Privacy Statement overleaf**

## **PRIVACY STATEMENT**

We are collecting personal information on this Enrolment Agreement Form for the purposes of providing early childhood education for your child.

We will use and disclose your child's information only in accordance with the Privacy Act 1993. Under that Act you have the right to access and request correction of any personal information we hold about you or your child.

Details about your child's identity will be shared with the Ministry of Education so that It can allocate a national student number for your child. The unique identifier will be used for research, statistics, funding, and the measurement of educational outcomes.

You can find more information about national student numbers at: [www.minedu.govt.nz/parents](http://www.minedu.govt.nz/parents)