



## FEE SCHEDULE

From February 1 2008

<u>HOURS PER DAY</u>	<u>DAYS/WEEK</u>	<u>WITH 'FREE' ECE</u>	<u>NO 'FREE' ECE</u>
<b>SHORT DAYS</b> (8:30-3:30)	2 days	\$ 50	\$ 100
	3 days	\$ 65	\$ 135
	4 days	\$ 85	\$ 165
	5 days	\$ 105	\$ 185
<b>FULL DAYS</b>	2 days	\$ 70	\$ 120
	3 days	\$ 95	\$ 165
	4 days	\$ 120	\$ 200
	5 days	\$ 150	\$ 230
<b>LATE/EARLY FEES</b> (For early drop-off or late pick-up)	First 10 mins	\$ 15	
	Per min thereafter	\$ 1	
<b>OVERDUE FEES</b>	Overdue accounts	10% of outstanding balance	

## TERMS AND CONDITIONS OF ENROLMENT

- 1 I understand that a \$50.00 non-refundable administration fee is to be paid to secure my child's enrolment or place on the waiting list.
- 2 I will give two week's notice in writing, before my child leaves the centre, otherwise I will pay two weeks fees in lieu of notice.
- 3 I understand that full fees are payable every week that the centre is open, regardless of whether my child is absent for sickness, holiday (incl public holidays) or any other reason.
- 4 If I am late to collect my child, I will be charged a late fee in accordance with the current fee schedule.
- 5 All fees are to paid weekly in advance. If my account is in arrears, Kids Inn may ask me to remove my child until payments are up to date.
- 6 I acknowledge that I will be held liable for any collection costs and interest on all outstanding fees.
- 7 I give permission for staff to seek medical help for my child if necessary. This includes an emergency and allowing regular health checks as carried out by Plunket or Public Health Nurse.
- 8 I give permission for my child to go on walks and excursions with staff, with a adult/child ratio of 1:4 and for my child to have their photo or video taken. I understand that photos may be used for centre documentation, planning, portfolios and advertising purposes, on [www.kidsinn.co.nz](http://www.kidsinn.co.nz).
- 9 I have read and understood the terms and conditions of my child's enrolment at Kids Inn Nursery & Preschool, and agree to abide by the Centre Policies and Procedures.



## ENROLMENT FORM

### CHILD'S DETAILS

Child's Full Name \_\_\_\_\_

Date of Birth \_\_\_\_\_ Ethnic Origin \_\_\_\_\_

### ENROLLING PARENTS/GUARDIANS

#### **MOTHER'S NAME**

\_\_\_\_\_

Address \_\_\_\_\_

Telephone (home) \_\_\_\_\_ (work) \_\_\_\_\_ (mob) \_\_\_\_\_

Occupation \_\_\_\_\_ E-Mail \_\_\_\_\_

#### **FATHER'S NAME**

\_\_\_\_\_

Address \_\_\_\_\_

Telephone (home) \_\_\_\_\_ (work) \_\_\_\_\_ (mob) \_\_\_\_\_

Occupation \_\_\_\_\_ E-Mail \_\_\_\_\_

### CHILD'S SIBLINGS

\_\_\_\_\_

### EMERGENCY CONTACTS (In case we can not contact you)

Full Name \_\_\_\_\_

Relationship to child \_\_\_\_\_ Phone \_\_\_\_\_ Mobile \_\_\_\_\_

Full Name \_\_\_\_\_

Relationship to child \_\_\_\_\_ Phone \_\_\_\_\_ Mobile \_\_\_\_\_

### ADULTS AUTHORISED TO COLLECT/VISIT CHILD (In addition to those listed above)

Full Name \_\_\_\_\_

Relationship to child \_\_\_\_\_ Phone \_\_\_\_\_

Full Name \_\_\_\_\_

Relationship to child \_\_\_\_\_ Phone \_\_\_\_\_

### PEOPLE WHO DO NOT HAVE CUSTODY RIGHTS OR HAVE CONDITIONAL ACCESS

(A copy of the court order is required and a photo of the person so they can be identified)

Full Name \_\_\_\_\_

Relationship to child \_\_\_\_\_

## **MEDICAL INFORMATION**

Child's Doctor \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_

Medical Information, eg allergies

Chronic Conditions: incl details, action plan from GP/specialist & any other info we may require

## **IMMUNISATIONS (Please provide latest copy of immunisation certificate)**

Complete YES/NO Comments \_\_\_\_\_

## **DISCLAIMER**

I attest that my child is not enrolled at another childcare centre for the same hours of attendance for which they are enrolled at Kids Inn Nursery & Preschool.

## **TERMS AND CONDITIONS**

Initial

- 1 I understand that a \$50.00 non-refundable enrolment fee is to be paid to secure my child's enrolment or place on the waiting list
- 2 I will give two week's notice in writing, before my child leaves the centre, otherwise I will pay two weeks fees in lieu of notice.
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- 9 I have read and understood the terms and conditions of my child's enrolment at Kids Inn Nursery & Preschool, and agree to abide by the Centre Policies and Procedures.

\_\_\_\_\_  
(Parent/caregivers signature)

\_\_\_\_\_  
(Parent/caregivers signature)

Date: \_\_\_\_\_

If you wish you may inspect and correct these details. Records will be kept for seven years.

# YOUR CHILD'S ROUTINE

## SLEEPING

Does your child sleep during the day? Details \_\_\_\_\_

Does your child have a dummy? cuddle rug? \_\_\_\_\_

*Please note that we do not allow children to be put to bed with a bottle*

## FOOD/DRINKS

Does your child have a bottle? \_\_\_\_\_

Any special dietary requirements, eg  
religious beliefs, vegetarian, etc \_\_\_\_\_

## YOUR CHILD

What does your child like doing?  
(eg art, outside play) \_\_\_\_\_

What doesn't your child enjoy?  
(eg messy play) \_\_\_\_\_

Other details (eg shyness, independence, special  
blanket or toy, dummy when out of bed?) \_\_\_\_\_

## GOALS

Are there any particular goals you have for your  
child that we should be aware of (eg toileting,  
drinking from a cup, writing their name, etc) \_\_\_\_\_

## ANY OTHER INFORMATION

Any other information that we may need to be  
aware of? \_\_\_\_\_

*Please feel free to speak to the Centre Supervisor to discuss any information in more detail or update any of this information at any time.*

## TO HELP US:

How did you hear about Kids Inn Nursery & Preschool?

Yellow Pages - Online  Building signage  Newspaper advert

Yellow Pages - Book  Friend  Supermarket noticeboard

Web site  Local Directory  Other \_\_\_\_\_



## BOOKING FORM

### INITIAL BOOKING

I would like my child to attend Kids Inn on the following days, starting from (date): \_\_\_\_\_

Day	Monday	Tuesday	Wednesday	Thursday	Friday
Time - start					
- finish					

PARENT SIGN: \_\_\_\_\_ Date: \_\_\_\_\_

### BOOKING CHANGE

I wish to change my child's booking at Kids Inn to the following days effective from: \_\_\_\_\_

Day	Monday	Tuesday	Wednesday	Thursday	Friday
Time - start					
- finish					

PARENT SIGN: \_\_\_\_\_ Date: \_\_\_\_\_

### BOOKING CHANGE

I wish to change my child's booking at Kids Inn to the following days effective from: \_\_\_\_\_

Day	Monday	Tuesday	Wednesday	Thursday	Friday
Time - start					
- finish					

PARENT SIGN: \_\_\_\_\_ Date: \_\_\_\_\_

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PARENT SIGN: \_\_\_\_\_ Date: \_\_\_\_\_