STUDENT INFORMATION	CHILD 1	CHILD 2	CHILD 3	CHILD 4	
Surname:					
Given Name/s:					
Preferred Name:					
Gender:	Male / Female	Male / Female	Male / Female	Male / Female	
Date of Birth:					
Year Level:					
To Start:	20 / ASAP	20 / ASAP	20 / ASAP	20 / ASAP	
Language Spoken at Home:					
Aboriginal:	Yes / No	Yes / No	Yes / No	Yes / No	

EMERGENCY CONTACTS / AUTHORITY TO COLL	ECT (Other than Parent or Guardian)
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contacted. THE CHILD/REN WILL ONLY BE RELEASED TO A NOMINATED PERSON. They must be over 18 years old at the time of nomination and be available to pick up or child during the hours of care. Authorisations can be added or removed at any time with permission. Only two (2) Emergency Contacts required									
Title:	Emergency Contact 1 Mr Mrs Ms Miss		Emergency Contact 2 Mr Mrs Ms Miss						
Full Name:									
Relationship to Student:									
Mobile Number:									
Alternative Phone:									
Home Address:									
Is English your first language?	Yes / No		Yes / No						
lf no, first spoken language:									
This Person has permission on my behalf:	Collection	Excursion	Medical	Collection	Excursion	Medical			
Title:	Emergency Contact 3 Mr Mrs Ms Miss			Emergency Contact 4 Mr Mrs Ms Miss					
Full Name:									
Relationship to Student:									
Mobile Number:									
Alternative Phone:									
Home Address:									
Is English your first language?	Yes / No		Yes / No						
lf no, first spoken language:									
This Person has permission on my behalf:	Collection	Excursion	Medical	Collection	Excursion	Medical			

**<u>Collection</u>**: This gives the person permission to pick up children. They must be over 18 years old and be available to pick up your child during the hours of care and be within a reasonable distance from the service. Please note we require at least two emergency pick up contacts.

**Excursion:** This gives the person authority to permit an educator to take your child outside the education and care premises.

<u>Medical:</u> This gives the person authority to consent to medical treatment for your children from a medical practitioner, hospital and/or ambulance service.