Comm Unity Plus Services Ltd
Neighbourhood House Children's Enrolment Form
(Please fill out a form for each child)

Child's Details

Name of child:

Date of Birth:

Age Range:
□ 0-5
□ 6-10
□ 11-15
□ 16-18

Gender:
□ Male
□ Female
□ Other

What school does your child attend?

What grade is your child in?

What language/s does your child speak at home?

What is your child's preferred language?

Parent/Guardian's Details

Name of Parent/Guardian:

Phone Number:

Email:

Mobile Number:

Address:

Child's Health Information

Does your child suffer from any medical conditions or allergies?
□ Yes
□ No

If yes, please state medical condition, allergy and/or medications:

If your child has Anaphylaxis, Asthma, Diabetes or Epilepsy, please provide your Medical Management Plan from your doctor and ensure that any Auto-injector, asthma pump/spacer or any other medical reliever tool is provided to the Neighbourhood House Coordinator.

Is there any other medical conditions or information that you would like to notify us about?

Other Information

Are there any Court Custody and/or Access Arrangements?

□ Yes

□ No

If yes, please provide a copy of relevant documentation.

Emergency Contact Details - Parent/Guardian

Full Name: _____ Phone Number: _____

Please advise who you authorise to collect your child in your absence:

Alternative Emergency Contact 1:

Full Name: _____ Phone Number: _____

Relationship to the Child: _____ Address: _____

Alternative Emergency Contact 2:

Full Name: _____ Phone Number: _____

Relationship to the Child: _____ Address: _____

Please note, that photo proof of identification will be required for the child to be collected. E.g. Driver's License

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How did you hear about Comm Unity Plus Services?

□ The commUnity+ Website

□ Promotional Material (Brochures/Flyers)

□ Social Media (Facebook, Twitter or LinkedIn)

□ Internet Search

□ Brimbank City Council Website

□ Local Businesses

□ Friends/Family

□ Other Community Organisations

Parent/Guardian's Name:

_____

Signature of Parent/Guardian: _____ Date: _____/_____/_____