

Crèche Enrolment Application 2024 / 2025

Child's Information					
First Name:		Last Name:	Last Name:		
Date of Birth:		Male		Female	
Toilet Trained:	YES	NO	IN PROGRES	IN PROGRESS	
*Plea	ase provide a change o	of clothes and nappi	ies (if required) for	your child	
Are there any famil	y court orders and,	or custody issue	es relating to the	child? YES / NO	
Likes / Dislikes:					
Any other helpful sugg	estions; e.g. Likes to lo	ook at books.			
Parent / Caregiver	Information				
First Name:		Last Name:			
Address:					
Telephone:		Mobile:			
Email:					
Emergency Contact	Details				
In the event of an e		•	egiver the emer	gency contact has	
First Name:	ct my child from cre	Last Name:			
Thist Nume.		Last Name.			
Relationship:					
Contact Number:					

Photographs				
Ito have photographs taken for the purpose of advertising/social media/promotional activities for the Shire of Ea Pilbara.				
Parent/Caregiver Signature:				
Acceptance of Conditions of Use				
 I accept that I must stay within Newman Recreation Centre whilst my child attends crèche. I understand that I must immediately return to the crèche to attend to my child should I be requested to do so by crèche staff. I have read and understood that the crèche is an unlicensed service and I have received a copy of the Newman Recreation Centre's Crèche Information Sheet. 				
Parent/Caregiver Signature:				
Medical Conditions and Special Needs				
We are unable to care for sick children or children with a contagious illness.				
Is your child up to date with their Immunisations: YES NO				
Does your child have any known allergies: YES *provide details NO				
Please state any other condition which may require EMERGENCY ACTION by crèche staff.				
Administering medication is the responsibility of parents not crèche staff. However, this information may be required in case of an emergency.				
I consent to medical treatment being obtained for my child in an emergency.				
Parent/Caregiver Signature:				