

## Parent/Guardian Contact Details

Full Name: \_\_\_\_\_  
 Relationship to child: \_\_\_\_\_  
 Membership Number: \_\_\_\_\_  
 Date of Birth: \_\_\_\_ / \_\_\_\_ / \_\_\_\_  
 Address: \_\_\_\_\_  
 \_\_\_\_\_  
 Phone: \_\_\_\_\_  
 Driver's License: \_\_\_\_\_

Full Name: \_\_\_\_\_  
 Relationship to child: \_\_\_\_\_  
 Membership Number: \_\_\_\_\_  
 Date of Birth: \_\_\_\_ / \_\_\_\_ / \_\_\_\_  
 Address: \_\_\_\_\_  
 \_\_\_\_\_  
 Phone: \_\_\_\_\_  
 Driver's License: \_\_\_\_\_

## Child Details

Child's Name: \_\_\_\_\_  
 Age: \_\_\_\_\_

Child's Name: \_\_\_\_\_  
 Age: \_\_\_\_\_

Child's Name: \_\_\_\_\_  
 Age: \_\_\_\_\_

Medical Concerns/Allergies:

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Special Requirements:

Special Requirements:

Special Requirements:

## Emergency Contact/s [other than parent/guardian]

Relationship to child: \_\_\_\_\_  
 Full Name: \_\_\_\_\_  
 Date of Birth: \_\_\_\_ / \_\_\_\_ / \_\_\_\_  
 Address: \_\_\_\_\_  
 \_\_\_\_\_  
 Phone: \_\_\_\_\_

Relationship to child: \_\_\_\_\_  
 Full Name: \_\_\_\_\_  
 Date of Birth: \_\_\_\_ / \_\_\_\_ / \_\_\_\_  
 Address: \_\_\_\_\_  
 \_\_\_\_\_  
 Phone: \_\_\_\_\_

## Authorisation Checklist

- I understand that there is \$3 donation per child for the crèche service
- I am aware my child must be signed in and out by one of the listed contacts only [ID shown]
- I am aware my child is not to be in the crèche for more than 2 hours at one time
- I understand my child cannot attend crèche if it has reached capacity [bookings required]
- I give permission for the crèche to supply a snack, labelled water bottles should be brought
- I understand my child must wear a labelled hat and have sunscreen applied
- I understand there are no facilities for heating bottles or baby food in the crèche and it is my responsibility to feed my child prior to or during crèche
- I give permission for First Aid to be administered on my child should it be required
- I give permission for a carer to accompany my child to the toilet [under school age]

Signature: \_\_\_\_\_ Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_