



ENROLLMENT FORM

Welcome to Caia Nursery! Caia Nursery holds your child's wellbeing in the highest regard. Once accepted into our program, every effort will be made to see that your child's transition is positive and successful.

This enrollment form does not constitute automatic acceptance into any of Caia Nursery programs and care.

Child's Name: _____ Date of Birth: _____

Child's Age: _____ Home Telephone: _____

Home Address: _____

Mother's Information

Name: _____ QID: _____

Mobile Number: _____ Work Number: _____

Place of employment: _____ Email Address: _____

Father's Information

Name: _____ QID: _____

Mobile Number: _____ Work Number: _____

Place of employment: _____ Email Address: _____

COLLECTION CONSENT FORM

Name of child

I consent to the following adults collecting my child on my behalf from Caia Nursery.

Note: Your child will not be released to persons other than those listed below, unless your written permission is provided.

Name of collector	QID	Relationship to child	Mobile number

I Parent/Guardian of _____ hereby authorize the management and staff of Caia Nursery to allow my child to leave with the above person(s). I also authorize and allow the above person(s) to take the decision of my child in case of parental absence and or in care of emergency of unavoidable circumstances and that no appeal shall lie against it.

Signature of Parent/Guardian: _____ Date: _____

CHILD INFORMATION AND HEALTH HISTORY

Please describe the challenges your child has. If any known allergies, existing illness, previous serious illnesses and/injuries, any disabilities, any hospitalization since childbirth. Please provide information on any medication prescribed for long-term continuous use or any other medical information the staff need to be aware of.

To accommodate any special needs for your child, we shall require a written authorization from the Parent/Guardian or the Child’s Physician. The parent/guardian is responsible from providing any equipment/training that the staff requires in relation to the mentioned need. In certain cases, Caia Nursery will require a meeting with the child’s therapists to demonstrate how they care for the child and give nursery specific instructions. Please note that Caia Nursery has the right to offer placement only once a detailed assessment has been conducted and concluded that the said child does not pose a threat to him/herself or the other children and staff in our nursery.

If the child has attended another nursery prior to admission, please list the name of the previous nursery(s)

Name of Nursery: _____ Phone: _____

Reasons for leaving previous Nursery: _____

MEDIA RELEASE FORM

I, _____ Parent/Guardian of _____ hereby grant absolute right and permission to Caia Nursery to photograph/film my child and use the content, and/or reproduction thereof for purposes including but not limited to Caia Nursery's advertisements, illustrations, literature, brochures, websites, and other business purposes.

I understand that Caia Nursery will not print or release identifying information in any public means. I understand that Caia Nursery may release some identifiable information, including first names, in conjunction with photographic images. I understand that the term photograph encompasses both still photographs and motion picture footage.

Signature: _____ Date: _____

RELEASE AND LIABILITY STATEMENT:

**Our every effort will be that children in our controlled monitored environment are safe and taken care of to the best of our ability. There will be no deliberate negligence or action against the safety of any child in our care, even during outdoor activities we will try our best to ensure the children's safety and security is our top priority.

By signing this statement, I agree to release and hold harmless Caia Nursery, its employees and agents, to the maximum extent permitted by law, from any and all liability for any injury, loss, damage or death caused to my child(ren), me or my or my child(ren)'s property arising from or in connection with, whether directly or indirectly, the business operations of Caia Nursery and/or the acts or omissions of the owner, employees and agents of Caia Nursery.

Signature of Parent/Guardian: _____ Date: _____

Documentation required:

- Child's birth certificate
- Child's QID
- Child's immunization record
- Two passport size photographs of the child
- One passport size photograph of each Parent/Guardian
- Copies of QID of both parents/Guardians