## **Extreme Kids Youth Programmes**

**Provided By: ESports Gaming Whangarei** 

Venue: Extreme Mini Golf

## **Child Enrolment Form:**

Name(s): 1.			Age(s):	
		<u> </u>		
2				
3				
Enrolment Deta Week One	ils: (Please Tick)			
	☐ Tuesday	$\square$ Wednesday	☐ Thursday	☐ Friday
Week Two				
☐ Monday	☐ Tuesday	☐ Wednesday	☐ Thursday	☐ Friday
Price:				
<b>Price:</b> \$60.00 per child.	per dav.			
\$60.00 per child,	•	Z approved. For more	information see ES	GW Staff.
\$60.00 per child, Our programs ar	•	Z approved. For more	information see ES	GW Staff.
\$60.00 per child, Our programs an MSD#: 90	e OSCAR and WINZ 0-075-994	Z approved. For more  by eftpos or cash or		GW Staff.
\$60.00 per child, Our programs ar  MSD#: 90  Payment can be	e OSCAR and WINZ 0-075-994 e made on the day		direct credited to	GW Staff.
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Caregiver 2:	Relationship to child:
Home Address:	
Phone: Work:	Home: Cell:
People Authorised to collect you	our child(ren):
Emergency Contact #1:	
Name:	
Home Address:	
Phone:	Email:
Emergency Contact #2:	
Name:	Relationship to child:
Home Address:	
Phone:	
Doctor's Details:	
	Phone:
Childs Doctor:  Practice Address:	
Additional Information:  Does your child have any particu	lar health needs we should be aware of? asthma, medical conditions etc.)
, ,	know about in order to provide the best care for your child?
(eg. custody arrangements, spec	ial needs, behavioural issues etc)

## **Parent / Main Caregiver Contract:**

## Important Information:

Your child must provide their own lunch and drink bottle. We will supply snacks and fruit. There is filtered water available to refill drink bottles. We have a small selection of drinks and snack food available for purchase, however we do not take any responsibility for money sent with your child.

Staff Only

Important Information:  Do you give permission for photos of your child/ren to be taken and used for marketing purposes only
YES - NO Sign
Please sign this contract to complete the enrolment. If you have any questions about the program please do not hesitate to ask a member of our staff.
<ul> <li>I/We Agree and acknowledge: <ul> <li>I have read and understand the enrolment information</li> <li>The Holiday Programme Supervisor has my permission to arrange any necessary urgent medical treatment at my cost.</li> <li>I will notify the Holiday Programme Supervisor of any changes to enrolment as soon as possible.</li> <li>I agree to pay the fees as stipulated in this enrolment form.</li> </ul> </li> </ul>
All care will be taken to provide care and supervision to all children attending the programme in accordance with the programme policies and procedures.
LIMITED CONFIDENTIALITY  "I acknowledge that the information contained herein is confidential and, pursuant to the Privacy Act, will only be strictly used by the ESports Gaming Whangarei team to effectively care for my child and not used or distributed for any other purposes. Representatives from the social services procurement team, Ministr of Social Development may view this information as part of the programme assessment process."
Name of Caregiver:
Signed:Date:

Enrolment Processed By: Date: