

Busy Bees Application Form

Today's Date:	
Please tick the preferred session for your child/children:	Tuesday <input type="checkbox"/> 9:30am – 11am Thursday <input type="checkbox"/> 9:30am – 11am
Commencing:	Term 1 <input type="checkbox"/> Term 2 <input type="checkbox"/> Term 3 <input type="checkbox"/> Term 4 <input type="checkbox"/>

Parent/Guardian Information

Mother/Guardian 1

Title:	Surname:	Given Name:
Residential Address:		
Postal Address: <i>(if different from above)</i>		
Mobile Number:	Home Number:	
Email Address:	Relationship to Child/ren:	

Father/Guardian 2

Title:	Surname:	Given Name:
Residential Address: <i>(if different from above)</i>		
Postal Address: <i>(if different from above)</i>		
Mobile Number:	Home Number:	
Email Address:	Relationship to Child/ren:	

Emergency Contact Details (other than the person bringing child/children to Playgroup)

Full name:
Contact Number/s:

Child/Children Details:

Child 1 Full Name:	Date of Birth:
Medical Condition/Allergies:	Is this child enrolled at MECS? Y / N
Child 2 Full Name:	Date of Birth:
Medical Condition/Allergies:	Is this child enrolled at MECS? Y / N
Child 3 Full Name:	Date of Birth:
Medical Condition/Allergies:	Is this child enrolled at MECS? Y / N

Permissions:

Photos: MECS staff may take photos of your child, for purposes such as inclusion in the MECS weekly newsletter. Do you give permission for your child's photo and name to be published in the MECS newsletter, annual magazine, MECS website (without surnames) and MECS information material (without names)?

☐ Yes

☐ No

MECS staff will not post any photos on Facebook or any other social media outlets that contain any faces or identifiable features.

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Playgroup Undertakings & Consent

- I understand that this group is primarily a playgroup, and unless I have made other arrangements with another person, I will attend the sessions with my child.
- I consent to any emergency treatment being administered to my child, either with or without my presence, should it be necessary.
- Where it is deemed necessary, I consent to having an ambulance called for my child or myself. I agree to pay any expenses that may be incurred.
- I agree to pay the term fees by the third week of term. (Statements will be provided at the beginning of each term.) If this is a problem, I will speak to the Accounts Department to make alternative arrangements.
- I understand that my enrolment in Busy bees does not give me any priority for an enrolment position at MECS.
- I agree that I will not post any photos of Busy Bees children other than my own on any social media outlets without the consent of the child's parent.

Privacy: *Your privacy is important. MECS has developed a Privacy and Confidentiality Policy that explains how we collect, use and manage personal information, including health information, which is in line with government requirements. If you wish to see the full policy, please ask at the Office or the Kindergarten.*

Parent Signature:

Date: