



Christian Brothers College

A Birth-12 Catholic College for boys in the Edmund Rice Tradition
 Faith **Excellence** Community **Compassion**

Senior Campus
 214 Wakefield Street, Adelaide SA 5000
 P 08 8400 4200 F 08 8400 4299

Junior Campus
 324 Wakefield Street, Adelaide SA 5000
 P 08 8400 4222 F 08 8400 4220

CBC Community Children's Centre
 178 East Terrace, Adelaide SA 5000
 P 08 8223 5469 F 08 8223 7803

GPO Box 2707 Adelaide SA 5001
 enquiries@cbc.sa.edu.au
 www.cbc.sa.edu.au

Christian Brothers College OSHC 2017 Application

We understand you may have filled this information out in the past: but it is a requirement that the form be completed annually as circumstances often change. This form must be fully completed and returned, before care can commence in 2017.

Family Name.....

Home address.....

Preferred Email address for account purposes (please print).....

In order to claim the Child Care Benefit (CCB) / Child Care Rebate, a Centrelink Customer Reference Number (CRN) and a date of birth for both the primary contact and all children is required. For more information about the childcare Benefit, please contact the Department of Human Services on 136150.

Parent/Caregiver Name	Telephone (Home)	Telephone Work	Telephone Mobile	Parent/Caregiver Date of birth	Parent Caregiver CRN

Child's Name	Gender	Class	Child's CRN	Child's Date of Birth	Service required (Circle if needed)
					BSC / ASC / VAC
					BSC / ASC / VAC
					BSC / ASC / VAC
					BSC / ASC / VAC

Permanent Bookings

Please write the initials of the child/ren that you require **permanent** bookings for in each time slot.

	Monday	Tuesday	Wednesday	Thursday	Friday
Before School Care 7.15am – 8.15am (breakfast included)					
Before School Care early arrival 7.45am – 8.15am					
After School Care 3.30pm -6.00pm					

If your child is currently receiving CCB at another Centre, please indicate this to our service. **Yes/ No**

Names of other persons who may collect your child/children.

.....RelationshipTelephone
.....Relationship.....Telephone

I do/do not consent to my child’s image being used on the CBC Website/Facebook page.

Homework Policy (Please circle your preferred answer)

At Christian Brothers College OSHC our aim is to encourage learning in a leisure based environment. From Year 2 onwards we provide a set homework period of (20 min): however, if you prefer your child to engage in other learning activities during this time please indicate this in your answer below.

I would/would not prefer my child (Yr 2 onwards) to complete homework at OSHC in the set time.

Medical Information

Please indicate any medical conditions and necessary medication or treatment for your child/children. Please include a recent medical action plan with this enrolment.

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Emergency Contact (other than parent/carer)

Name

Contact Details: Home.....Work.....mobile.....

Medical Attention in Case of Emergency

In the case of accident or emergency, every effort will be made to contact parents/guardians. In the event of my child receiving injuries requiring urgent medical attention, I authorize the seeking of that medical attention and agree to pay all costs incurred on behalf of my child.

Parent’s Signature.....

I/We

1. Agree to adhere to the OSHC Policies and procedures: including arrival and pickup procedures correct booking policies, and behavior management expectations.
2. Am/Are aware the policies are reviewed fortnightly: and are available for parents to view and comment within the Centre.
3. Have read and understood requirements as per the current parent information handbook, which is available on the CBC Website or can be pursued at the OSHC.
4. Am / Are aware that payments are to be made within 14 days of the invoice date. The service may exclude attendance if payment is not made with this timeframe.

Parents/Guardian signature.....Date.....

Office Use Only:

Directors Signature

.....Date.....

1.CRN	
2.DOB	
3.Booking	
4.Class	
5.OSHC Medical Plan received.	