*** Enrolment Form***

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| --- | --- | --- |
| Student Surname: | First Name: | Date of Birth: |
| Age: | Gender M/F | Language spoken at home: |
| Mothers Full Name: | Mothers Address: | Home Phone:  Work:  Mobile: |
| Fathers Full Name: | Fathers Address: | Home Phone:  Work:  Mobile: |
| Emergency Contact person:  Relationship to child: | Address: | Home Phone:  Work:  Mobile: |

**Collecting the child from LIVA Learning**

Your consent is required to authorize a minimum of two people to collect your child from the service on your behalf in the event a parent or guardian cannot collect their child. Only the people named here will be able to collect your child and will be required to produce their driver’s license as a form of identification.

|  |  |  |
| --- | --- | --- |
| Name:  Relationship to child: | Address: | Home Phone:  Work:  Mobile: |
| Name:  Relationship to child: | Address: | Home Phone:  Work:  Mobile: |

**Medical Conditions**

Does your child have any medical conditions eg allergies, epilepsy, asthma, heart condition etc?

If Yes, please provide details of any allergy and any management procedure to be followed with respect to allergy.

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Doctor’s Details:

Ambulance Subscription: **YES NO** Ambulance Membership Number:

**Medical Declaration:**

I authorize the supervising teacher in the case of emergency to seek medical, hospital or ambulance service and agree to meet any expenses incurred.

Signature­­­­­­­­­­­­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Photographs:**

As part of documenting children’s learning staff may wish to photograph or video your child. Please sign below if you authorize teaching staff to take photographs / videos of your child for display, advertising and to use in children’s take home books or records.

Authorisation Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date*\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_­­­­­­­­*

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**Terms and conditions:**

* Your choice of class time and date is subject to availability.
* Full payment is to be made at the beginning of each term.
* Confirmation of payment is required before commencing the program.
* LIVA Learning accepts payments by *Cash, Direct Deposit (with the child’s name as the reference) Money Order, Cheques made payable to LIVA Learning and PayPal.*
* LIVA Learning reserves the right to cancel or change any classes due to certain circumstances.
* If your child is absent due to holiday or illness, we will try to provide a make up lesson during the term, however this is due to availability and numbers. We will provide you with any material your child may have missed.
* LIVA Learning will allow 5 minutes after class has finished to collect your child. Please be on time when dropping off and collecting your child otherwise a fee will incur.
* No food is to be brought on to the premises, only a drink bottle containing preferably water.
* Children must be toilet trained in order to enrol.
* Any person collecting a child must be on the parent/guardian form and must show their drivers license upon pick up.
* Take home readers are required to be returned each week, if they are damaged or lost a replacement fee will incur.

I accept and agree to the Terms and Conditions of enrolment for my child as stated above.

Please Sign Here\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_