

# MA-FI ARTS WORKSHOP

## OSCAR Enrolment Form End of Term - Holiday Programme

### *Child (ren)'s details*

Name(s) Age(s)

1. ....

2. ....

3. ....

4. ....

**School/s Attending:**.....

**Enrolment details:** Year 20....., ..... **Holidays**

Please circle the days/dates/times you would like to enroll your child/ren.

<b>Mon</b>	<b>Tues</b>	<b>Wed</b>	<b>Thurs</b>	<b>Fri</b>
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Times of day child/ren to attend workshop. Morning and/or Afternoons.

<b>8am</b>	<b>9am</b>	<b>to 12pm</b>	<b>1pm to</b>	<b>4pm</b>	<b>5pm</b>	<b>5:30pm</b>	
		<b>10am</b>	<b>Until</b>	<b>3pm</b>	<b>4pm</b>	<b>5pm</b>	<b>5:30pm</b>

Minimum time to be in programme – am or pm = 3 Hours.

All day sessions available. If attending both mornings and afternoons each must be for two or more hours. Preference given to enrolments for sessions spread over two or more days Fee to be paid in advance.

### *People authorized to collect your child(ren)*

Mother's name.....

Home address.....

Telephone .....(day) .....(after hrs)

.....(mobile) Email.....

Address.....

Father's name.....

Home address .....

(if different)

Telephone .....(day) .....(after hrs).....(mobile)

Email .....

Address.....

**Two Emergency Contacts**

1.Name ..... Relationship to child.....

Address.....

Telephone contact between 9am and 6pm.....

2.Name ..... Relationship to child.....

Address.....

Telephone contact between 9am and 6pm.....

**Doctor's details**

Childrens' doctor ..... Telephone .....

Address .....

**Additional information:**

**Attendance register:** parent/caregiver/tutor to sign child in and out, drop off and pick up time to be stated. If a child is not escorted to or from the art room tutor will sign them in but only assume responsibility after the child is signed in and until they are signed out. Please inform tutors of pending absence or lateness. Enrolment contract is for duration of period booked. Refunds are not given. Missed sessions can be made up: within the current holiday programme times but not carried over to subsequent terms. If we are not informed of a pending absence credit will not be given.

**Health and Safety:** Does your child have any particular health needs we should be aware of? e.g, **allergies, food requirements, asthma, medical conditions etc**

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.....

Is there anything else we should know about in order to take good care of your child? e.g., **custody arrangements, special needs, behavioral issues: e.g. ADHD, etc.**

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Ethnic/Cultural background aspects to be taken into consideration: e.g. If not NZ born, where from?, How long in NZ, English language skill level:.....  
.....

**Parent contract**

Please sign this contract to complete enrolment. If you have any questions about this programme or wish to see a copy of the programme policies prior to signing, please do not hesitate to ask us.

- **I/we agree and acknowledge**
- **I have read and understand the enrolment information**
- **The supervisor: has my permission to arrange any necessary urgent medical treatment at my cost if I am not available to oversee. Supervisor will always in the first instance attempt to communicate with above contact persons prior to any action.**
- **I will notify the supervisor of any changes to enrolment information in a timely fashion.**
- **I agree to pay fees prior to/on commencement of the programme or pay a penalty fee of 10% of the total fee in addition to the term fee if my payment is late and I have not negotiated a special/different arrangement.**
- **In the event of unpaid fees parents will be liable to cover any costs incurred in debt collecting should the need arise**
- **Cancellation of enrolment needs to be activated prior to the commencement of the programme. Once the fee is paid and the child has commenced the programme refunds will not be given, accept for special circumstances eg. Sickness with Dr's certificate.**

All care will be taken to provide supervision of children attending the programme in accordance with programme policies and procedures.

Name of parent / caregiver:.....

Signature of parent:.....Dated.....

**Privacy Act 1993:** The information that you have supplied is necessary for the safe and effective operation of the Ma-Fi Arts programme. All personal information requested will be retained until the completion of your child's time in the programmes. You are welcome to review/edit information pertaining to your child's enrolment at any time.

**Artist Release Permission**

We frequently take photographs of the classes in action and would like your permission to use your child's image on our website as an illustration of what we do here. We will always enable the parent and the child to preview the image prior to seeking approval from both as to whether we can include the image on our website. I/We .....,Accept/Decline that Ma-Fi Arts Workshop use the image of ..... at work in the King Edward Court Studio.

**Any particular requests, comments or suggestions:**