Opua School Enrolment Form

Please read the instructions below carefully before you complete this enrolment form

Instructions The purpose of this enrolment form is to obtain from you the information we need to enrol your child into our school. We also need to collect information from you which is required by the Ministry of Education.

Please include a copy of your child's Birth Certificate/Passport and Immunisation Certificate. If there is a Court Order please bring a copy to the school to be kept on record. For overseas enrolments we need to take a copy of a Student Visa.

Please complete **ALL SECTIONS** of this form and return it to the school office. The Principal will meet with you once we have your completed enrolment form.

PUPIL INFORMATION			
Legal First Names:	_Legal Last Names:		
Preferred Name to be Called:		Boy/Girl	
D.O.B Home Phone	e		
Residential Address:		Postcode	
Postal Address:		Postcode	
Birth Certificate Number			
Previous School (if applicable)			
Previous Dental Clinic			
PARENT/CARE	GIVER INFORM	IATION	
With whom does the child live? (please ci	ircle) Both Parents	Mother Father Other	
Are there any custody arrangements that the If so, please provide relevant paperwork.	the school should be m	ade aware of? Yes / No	
Caregiver 1	Relationship	(Hm	
		C Cell	
Address		— C Wk	
Email Address			

Caregiver 2	Re	elationship		11.2	
Address Email Address			(Cell	
Emergency Contact 1	Ro	elationship	(Cell	11
Emergency Contact 1	Relationship		(Hm	
PRIOR PARTICIPATION IN EARLY Cone or more early Childhood Education Please complete the table below for the l	service	e(s) in the six m	nonths prior to		
Please enter the number of hours per wed up to three services.	ek for	Service 1 (hrs/week)	Service 2 (hrs/week)		Service 3 (hrs/week)
A. Kohanga Reo					
B. Playcentre					
C. Kindergarten or Education and Care C	Centre		T		
D. Home Based Service			T		
E. Playgroup					
F. The Correspondence School					
Did your child regularly attend Early Ch Yes, for the last years. Not regularly, only occasionally with No, did not attend ECE.			ıle.		
ETHNIC BACKGI	ROUI	ND (Required for Mi	nistry of Education Sta	itistics)	
Ethnicity (1)	Etl	hnicity (2)			
Iwi	_ Aff	filiation			
	rst Language Second Language				

MEDICAL DETAILS		
Medical Conditions:		
Allergies:		
Medicine:		
Immunisation: Fully Immunised (please circle) YES NO Doctor: Medical Centre:		
Doctor. Wiedicar Centre.		
PLEASE READ before signing this enrolment form		
*If my child, in the professional judgement of the Principal, requires medical attention, I hereby authorise the school to take whatever steps are required to ensure the well-being and safety of my child.		
*I also give permission to authorise Opua School to utilise Government organisations such as the Ministry of Education, Specialist Education Services, etc. to ensure my child receives appropriate assistance particular to my child's educational needs.		
I undertake to:		
• Ensure my child attends school regularly and punctually and will not be absent except in cases of illness or emergency. I will apply in writing to the Principal to request leave of absence for my child outside of the above reasons.		
 Notify the school of any absences as early as possible on the morning of any absence. 		
• Pay the yearly stationery fee of \$50 to cover all stationery costs for the school year as soon as possible.		
 Inform the school of any change of address, contact details or family circumstances within one week of it occurring. 		
Date Parent/Caregiver		
Signed		
Enrolment approved by Date		
Signed		

Blanket Consent for Education Outside The Classroom (EOTC)

Education Outside The Classroom (EOTC) is the name given to all events/activities that occur outside the classroom, both on and off the school site. This includes sport.

Opua School believes in using a range of environments and experiences to enhance our students' learning.

We have ready access to the beach, rivers, mountains, and the bush in our area and beyond. We are also close to various built environments in our community. These areas are rich learning environments for our students both in and out of school. They need to learn how to be safe. Our school also values the concept of providing students with opportunities. Thus some of the learning for students occurs beyond the school site and this document is seeking your consent for your child/ren to participate in such learning

The Ministry of Education's **EOTC guidelines** identify four EOTC activity types, each with recommended types of parental/caregiver consent. In brief they are:

Type of event	Description	Type of consent
A	On site- in the school grounds (i) Lower risk environments (ii) Higher risk environments*	(i) No consent sought or blanket consent (ii) Separate consent for each event or programme
В	Off-site events in the local community occurring in school time. (i) Lower risk environments (ii) Higher risk environments*	(i) Blanket consent at enrolment. (ii) Separate consent for each event or programme
C	Off-site events - finishing after school finishes (i) Lower risk environments (ii) Higher risk environments*	(i) Blanket consent at enrolment.(ii) Separate consent for each event or programme
D	Off-site residential overnight events (i) Lower risk environments (ii) Higher risk environments*	(i) Separate consent (ii) Separate consent for each event or programme

*Involves risk assessed to be greater than that associated with the average family activity.

All EOTC activity categories require staff to undertake an analysis of the risks, and identify the management strategies required to eliminate, isolate and minimise the risks. Emergency procedures are also in place.

I/we agree to the participation of	
In lower risk category A and B and C.	
EOTC events while a student at Opua School.	
I/we have provided the school with up to date medical, supervinformation through the enrolment form and will make every enderinformation current.	
Name Signature	Date

CYBERSAFETY AGREEMENT

I understand that:

- The only purpose for school computers and other Information Technology resources is to support classroom teaching and learning.
- The school will do its best to keep me safe while using global information systems such as the computer and the Internet.
- I know that I am not permitted to access material through the Internet which is offensive, dangerous, inappropriate at school or illegal*.
- I am forbidden to pass on such material by copying, storing or printing it.
- If I use email at school, I am not permitted to send any messages which are offensive, dangerous, in-appropriate at school or illegal*.
- I may use the Internet or email at school only if there is a teacher supervising me**.

Students

- * Please ask your teacher if you need any of these term explained to you.
- ** A school's Internet Safety Policy should address the issue on Internet access out of scheduled class time.

I understand how important it is to:

1. Take care of Information Technology resources, such as computers and the Internet.

Be careful with equipment and furniture.

Respect the copyrights on software that prohibit copying.

Use only school software on school computers.

2. Be considerate of other users.

Share available equipment.

Be careful not to waste computer resources, e.g. Paper.

Avoid disruption of the running of any computer or network.

Take care not to scan or display graphics, record or play sounds or type messages which could cause offence to others.

Remove immediately from the screen any material that would not be allowed at school which I accidentally come across and tell the teacher right away.

3. Be responsible for privacy and security.

I will not give anyone on the Internet information about myself or anyone else. This includes address, phone number, photograph or bank card information.

I will use disks / memory sticks only to backup work or take it to and from home.



Student

I have read this Agreement and know the importance of the school rules for the use of computers and the Internet.

I know that if I break these rules, I might lose the right to use a school computer and the school may take other disciplinary action against me which could include my removal from any course that involves computer use.

		\	
	NAME (PRINTED)	, (AGE/ROOM
	SIGNATURE (if able)	, ,	DATE
I have	nts/Caregivers e read this Agreement and understand that my child ment and the Internet as outlined here.	d is	responsible for using school
	e gone through the Agreement with my child and e may be consequences for breaking the Agreement.		nined its importance and that
dange	erstand while the school will do its best to restrict strous, inappropriate at school or illegal material on sponsibility of my child to have no involvement in	the	Internet or through email, it is
I give global	my permission forl information systems such as the Internet or email		to be given access at school to
	NAME (PRINTED)		
	SIGNATURE		DATE

^{*} If you would like to discuss this document please contact the school office.