## EMERGENCY CONTACT & OTHERS AUTHORISED TO COLLECT CHILDREN

(Information is required in full by the QLD Child Care Regulations)

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This information may l	help vou avoi	d late fees incu	rred if vou are	not able to bick	vour child by	close of business.

The following form is to advise the Centre Educators or persons authorised to sign out your child/ren if you cannot attend personally. If persons who are not listed (and/or do not have written authority) attempt to collect your child/ren the Centre Educators will follow the listed procedure:

Notify/contact you by phone at work or home.

2. Notify an emergency number to attend and authorise or object to collection.

If the person shows hostility – notify the police.

We regard these steps as necessary to ensure the proper care is taken of your child/ren while they are under our supervision and request that you FULLY complete this form in your child/ren's best interest.

## PERSONS AUTHORISED TO COLLECT YOUR CHILD

(Neighbour, Aunt, Uncle, Family Friend, Sibling etc.)

Parent's signature .....

CHILD'S NAME:
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NAME	Address *	Phone no *	E-mail address*	Relation to child *				
1								
2								
3								
(Please attach ad	ditional contact informat	ion if needed).						
Parent's sionati	are							
i arent s signati	ui v	••••••						
CUSTODY ARRA	NGEMENTS							
Please indicate whe	ther any legal custody arrange	ements exist in relation to y	our child/ren Yes [	No				
If yes, please attach	a copy of your parenting plan	/ orders relating to your ch	ild/children.					
Residence order (e.	g. full time with mum)							
Contact order (e.g.	father eligible care Friday 6pm	n-Sunday 6pm)						
	ional contact information if ne	eeded).						
IMPORTANT!!!!								
	PERSONS ARE EITHER BY <u>PRE</u> EN FROM THE CENTRE:	FERENCE OF PARENT AND	O/OR COURT ORDER NOT ALL	OWED TO COLLECT				
NAME		REASON (Personal/Court Order – please attach copy.)						