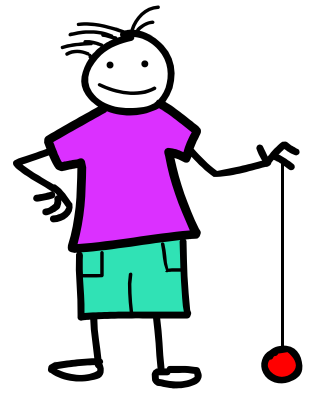


OSCA

30 Telford Avenue, Balmoral
Ph: 027 477 6722

Email: admin@goodshepherd.school.nz



BEHAVIOUR POLICY AGREEMENT

Child's name: _____

While at Good Shepherd School OSCA, I agree to:

1. listen to and follow the instructions of the OSCA staff;
2. play safely and fairly at all times;
3. respect OSCA equipment and school property;
4. follow the School Rules.

I understand that if my behaviour is unacceptable (eg hitting, kicking, swearing, destroying equipment, damaging property, being disobedient) then it will be recorded and my parents/guardian will be informed, and I will go on STEPS. I understand that I will be unable to attend OSCA for the remainder of the term if I reach STEP 3.

Child's signature: _____

STEP 1 Date: _____

Behaviour: _____

STEP 2 Date: _____

Behaviour: _____

STEP 3 Date: _____

Behaviour: _____

STUDENT PERSONAL INFORMATION

Full name of child: _____

Boy / Girl

Age: _____

Room No: _____

MOTHER'S DETAILS

Full name of mother: _____

Home address: _____

Telephone nos: Mob: _____ Work: _____

Home: _____

Mother's employer: _____

Address: _____

FATHER'S DETAILS

Full name of father: _____

Home address: _____

Telephone nos: Mob: _____ Work: _____

Home: _____

Father's employer: _____

Address: _____

OTHER DETAILS

Family doctor: _____ Ph: _____

Medical problems: _____

Any other relevant information:

Additional people authorised to collect my child from OSCA:

1. Name: _____ Ph: _____

2. Name: _____ Ph: _____

Parent's signature: _____ Date: _____

The following is a binding agreement between Good Shepherd OSCA Programme and the Parent/Guardian of

Child's name: _____ who is enrolled at OSCA.

I understand and agree to the following conditions:

1. Payments will be made in advance of my child's attendance at OSCA.
2. I agree to notify OSCA before 10.00am if my child is not attending on a day they are booked in.
3. I will be responsible for payment of all days my child is booked in.
4. I agree to pay \$10.00 per five minutes for any time my child remains at OSCA after 6.00pm.
5. I will notify OSCA immediately if there are any changes of circumstances that may affect contact numbers, health, custody, days the child will attend, or people authorised to collect my child.

Parent/Guardian: _____ Date: _____

OSCA Supervisor: _____ Date: _____