

Registering for Outside School hours care with Buderim OSHC


Step 1 – Register for My Family Lounge

To register and account, locate the My Family Lounge icon screen on the Child Care centre’s Website & Click on **REGISTER**. For Buderim OSHC click on the link below:

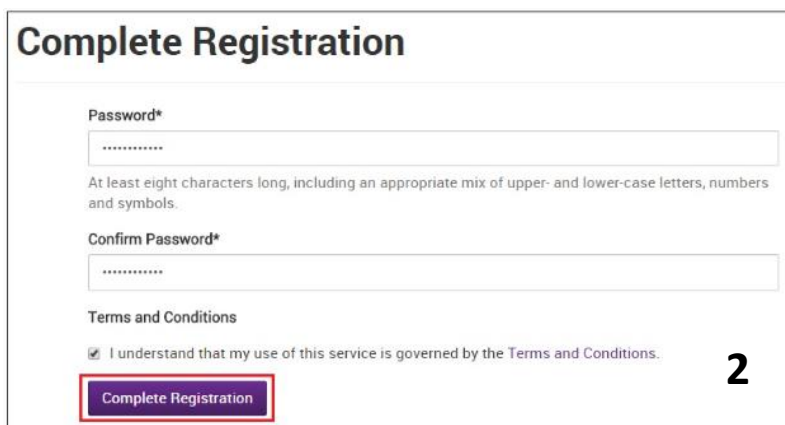
<http://www.buderimoshc.org>



Enter your email address and create a password – **keep this password in a safe place for future use!*
You will now receive an email to complete your registration (as below)
Complete all your details and click on **REGISTER**




You will now receive another email to confirm your registration and password -**see previous*
Click on **COMPLETE REGISTRATION (1)** and confirm your password. Now click on **COMPLETE REGISTRATION (2)**



Step 2 – Signing into your account & editing your details

Once registration is completed click on the **HERE** hyperlink which will take you to your account. Complete all details for yourself then click on **SAVE & NEXT**. Then complete the details for your Child. Click on **MAKE PERMANENT BOOKING**.

Your registration has been completed.
Please click [here](#) to sign in.
If your service is taking advantage of the My Family Lounge App, visit either the Google Play Store (Android devices) or the Apple App Store (Apple devices) and search for My Family Lounge and download.



Step 2. EDIT CONTACT

Special Contact: Primary Contact | Relation: **Mother**

First Name: Josie | Last Name: White

Email: josie.white@mailinator.com

Confirm Email: josie.white@mailinator.com

You must provide **at least 1 contact phone number**

Mobile No.: 0404123456 | Home No.: | Work No.: | Building: | Street Address: **1 Camellia Cres** | Suburb: **Brisbane** | State: **QLD** | Postcode: **4500**

CRN: | DOB: | Would you like a user set up for this contact? Yes No

SAVE & NEXT

STEP 3. ADD CHILD DETAILS

ADD ANOTHER CHILD

Tick the box if the child is unborn

First Name: Jason | Last Name: White

DOB: 02 Jun, 2013 | Gender: Male

Do you have a Customer Reference Number (CRN) issued by the Government relating to you being registered for child care benefits for this child? Yes No

I acknowledge that I have no CRN to provide in this form and as a result will not have CCB and other Government payments made to my account to reduce my out of pocket expenses.

Does your child have any special considerations we need to take into account for their enrolment? Yes No

Does your child have a diagnosed disability? Yes No

Additional Information: Jason is learning Italian with his Nonna

Authorisations

Contact Name	Collection	Emergency	Excursion	Medical
Campbell, Trudy	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

ADD PRIORITY OF ACCESS

Please select:

I would like to request permanent bookings for my child/ren. **MAKE PERMANENT BOOKING**

I only want to register for casual booking at this time. **FINISH REGISTRATION**

I would like to finish registration without saving information which I just entered. **CANCEL**


Step 3 – Creating a Booking

To make a permanent booking for your child you will need to add them to a wait list – *this does not mean there is a wait list, just that your child will need their position confirmed prior to having the booking confirmed.*

Click on the + symbol.

RECURRING BOOKING REQUESTS

No records found



- Select the centre type and name
- Enter your preferred start date and number of days you wish your child to attend
- Tick your preferred days
- Tick any days that do not suit you - *this is not mandatory*
- Enter any comments if required and click on **SAVE**

THE CENTRE WILL CONTACT YOU WITH AN OFFER OF PLACEMENT WHICH YOU NEED TO 'ACCEPT' – PLEASE KEEP AN EYE OUT FOR AN EMAIL.

ADD WAITLIST DETAILS

Select which child/children you are requesting days for *

Jason

Step 1. Please select the service type you require. *

<input checked="" type="checkbox"/> Long Day Care/ Kindergarten/ Preschool	<input type="checkbox"/> Before School Care <input type="checkbox"/> After School Care	<input type="checkbox"/> Vacation Care	<input type="checkbox"/> Occasional Care	<input type="checkbox"/> Registered Care
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Step 2. Please select centres from the dropdown that match your service type selection. *

Amelia's Bug-A-Lugs Centre ▾

Selected Service(s): Amelia's Bug-A-Lugs Centre

Step 3. Please specify days for your child:

Preferred start date * 18-01-2016 No. of Days * 2 Will you accept less days? Y N

	Mon	Tue	Wed	Thu	Fri	Sat	Sun
Preferred days *	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Days that do not suit me	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Step 4. Please enter any comments on flexibility:

APPLICATION DATE 21-09-2015

SAVE

CANCEL

4. Accepting an Offer

You will receive an email when the centre has a position for your child. Log into your MY family Lounge Account and click on **VIEW OFFER**. If you are happy with the offer, click on **ACCEPT**.

OFFER														
Legend														
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>											
Offered	Not Offered	Change to Existing Booking												
CHILD NAME	START DATE REQD START DATE	STATUS	CARE TYPE	CENTRE NAME	DAYS	M	T	W	T	F	S	S	OFFER EXPIRY ACCEPTED DATE	
Maria Dollar	28-09-15 5:28-09-15	Open	LDC/KIN/PRE	Vicki's Wonder Emporium	3	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	25-09-15	View Offer

VICKI'S WONDER & EMPORIUM

Letter of Offer

Date Submitted: 26-06-17

We are offering your child a place at the following centre:

Child Name	Jane Okaele
Centre	Vicki's Wonder & Emporium
Care Type	LDC/KIN/PRE
Start Date	5/06/2017
Days Offered	Thu,Fr
Previous Booking Days	Mon, Tue, Wed, Thu, Fri
Expiry Date	23/06/2017

Accept/Decline Offer
Please accept, decline or change the offer

Enrolment Form Submitted
Jane is enrolled at this service

Confirm
Please note you need to confirm to secure the placement.

[Accept](#) [Decline](#) [Decline & Change](#)