**Brighton Primary School OSHC**

**April 2019 Vacation Care**

**Consent Form**

I give permission for my child/ren\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ to attend the following incursions/excursions. I am aware of arrival and departure times, modes of transport, child/staff ratios, risk assessments, policies and what my child/ren will need each day.

**Parent Signature:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Date:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Emergency Contacts:** (Please provide, even if you have done this before)

**Name: Phone:**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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I have read and understood the centre’s policies on bookings, cancellations, payment, sun safety, water, nutrition, spending money, footwear, electronics and extreme weather.

**YES / NO**

My child has an allergy to sunscreen. **YES / NO**

I give permission for my child/ren to use sunscreen supplied by OSHC, in the event that no sunscreen has been provided. **YES / NO**

I give permission for OSHC staff to administer first aid and in cases of emergencies; I give permission to call an ambulance. **YES / NO**

I have read and agree to ‘Vacation Care Important Information’ form. **YES / NO**

I understand due to circumstances beyond the control of the centre management changes may occur to the advertised program due to inclement weather for a proposed excursion and result in my child staying in the OSHC centre for the day. **YES / NO**

**Medical and Health Information**

Does your child/ren have a health care need that could affect their safety at Out of School Hours Care? **YES/NO**

If YES please explain and ensure OSHC staff are provided with the appropriate medication and health care/medication plan.

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I have thoroughly read the Excursion Authorisation form and know I am able to ask OSHC staff to obtain a copy of the full risk assessments conducted for all excursions. **YES / NO**

**Parent Signature:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Date:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*\*Please turn over for booking form*

**Brighton Primary School OSHC**

**April Vacation Care 2019**

**Booking Sheet**

Child/ren Name: **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Date** | **Activity/Excursion** | **Booking****(tick)** | **Excursion/ Incursion permission****Parent to sign** | **Cancellation** | **Waiting List** |
| MON 15/4 | Badging Bonanza |  | **\*** |  |  |
| TUES 16/4 | **Wonder Park Movie - Odeon** |  | **\*** |  |  |
| WED 17/4 | **Street Sup Adelaide** |  | **\*** |  |  |
| THUR 18/4 | **Easter Extravaganza** |  | **\*** |  |  |
| FRI 19/4 | **CLOSED** |  | **\*** |  |  |
| MON 22/4 | **CLOSED** |  | **\*** |  |  |
| TUES 23/4 | **Scoffed Cooking School** |  | **\*** |  |  |
| WED 24/4 | **Amazing Anzac Day**  |  | **\*** |  |  |
| THUR 25/4 | **CLOSED**  |  | **\***  |  |  |
| FRI 26/4 | **Warrawong Sanctuary** |  | **\*** |  |  |

 **Please tick the days that you would like your child/ren booked into care**

Please list any suggestions you have for upcoming Vacation Care programs (optional):

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_