

**Brighton Primary School OSHC**  
**July 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**  
**July Vacation Care 2019**  
**Booking Sheet**

Child/ren Name: \_\_\_\_\_ & \_\_\_\_\_

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

Date	Activity/Excursion	Booking (tick)	Excursion/ Incursion permission <u>Parent to sign</u>	Cancellation	Waiting List
MON 8/7	Gardens Galore		*		
TUES 9/7	Odeon Cinemas		*		
WED 10/7	Crazy Craft Capers		*		
THUR 11/7	Flip Out		*		
FRI 12/7	Old Adelaide Gaol		*		
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MON 15/7	PJ Movie Day		*		
TUES 16/7	Zone Bowling		*		
WED 17/7	Street Up Adelaide		*		
THUR 18/7	Odeon Cinemas		*		
FRI 19/7	Plaster Paradise		*		

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

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- For CCS reductions please make sure that you are registered for approved childcare with Centrelink (13 61 50) and refresh your details on myGov if 8 weeks have lapsed. *Please ensure that you supply us with the best possible emergency contact number each day of your child's attendance and be familiar with the times and requirements for each day that your child attends.*
- ***OSHC Fees are required to be zero balance, prior to vacation care enrolment being accepted – if financial problem please speak to Trudy and work out payment plan.***