

# Edge Hill State School P&C Association

## Outside School Hours Care

### Vacation Care Request for Booking

Monday 18/9/17 to Friday 29/9/17

**Please note: Our service must have received a completed enrolment form for each new child as well as booking form before the child can commence care**

Account Name (parent surname)			
Address of Primary Account Holder			
Phone Number		Mobile number	
Email Address			

**All families must have submitted a copy of their child's immunisation to secure your booking.**

**Fees for Vacation Care are \$55 per child per day if booked no later than Friday 8<sup>th</sup> September 2017 , after this date fees will be \$60 per day, CCB and CCR will apply if applicable, all meals are included unless indicated on the program.**

**I/we agree to pay all fees 1 week in advance before my child may attend.**

- Week beginning Monday 18<sup>th</sup> September is due no later than Monday 11<sup>th</sup> September 2017
- Week beginning Monday 25<sup>th</sup> September is due no later than Monday 18<sup>th</sup> September 2017

**HOURS OF OPERATION ARE STRICTLY 7.00m TO 6.00pm.**

### Terms and conditions, please tick and sign at bottom:

- I/we acknowledge it is my/our responsibility to collect my/our account from the service.
- I/we certify that the information entered on this booking form is true and to the best of my/our knowledge is accurate.
- I/we will inform the service of any changes to the information included on the enrolment form to ensure our family details remain current.
- I/we acknowledge that if my child/ren become ill while at the service I/we will collect or arrange an authorised person to collect as soon as possible
- I/we acknowledge that the service is unable to care for children who are sick or have a contagious illness, and a medical clearance may be necessary before my child/ren is able to return
- I/we acknowledge children are to be collected prior to 6pm. A late fee penalty will be applied to your account. See Handbook for rates.
- I/we agree to notify the Service promptly if my child/ren is to be absent for any reason.
- I/we agree that my child/ren cannot leave Outside School Hours Care Centre with anyone other than a nominated person stated on this enrolment form without prior written agreement with the Co-ordinator.
- I/we agree that I/we or our nominated person are required to enter the school grounds and sign my child/ren in each morning (when applicable) and out each afternoon.**
- We adhere to the sunsmart policy, meaning children are required to wear hats, shoes and shirts with sleeves (short) when playing outside. **Please ensure your child has his / her hat and shoes upon arrival each day.**

Parent Name \_\_\_\_\_ Signature \_\_\_\_\_ Date \_\_\_\_\_

**The service will be open 7:00am – 6:00pm**

## Child/rens Booking Form

Child 1 full name				Class					
Mon 18 <sup>th</sup> Sept	\$25.	Tues 19 <sup>th</sup> Sept		Wed 20 <sup>th</sup> Sept		Thu 21 <sup>st</sup> Sept		Fri 22 <sup>nd</sup> Sept	
Mon 25 <sup>th</sup> Sept	\$10	Tues 26 <sup>th</sup> Sept	\$10	Wed 27 <sup>th</sup> Sept		Thu 28 <sup>th</sup> Sept		Fri 29 <sup>th</sup> Sept	

**Child's Swimming Ability**  
**Swimming Ability:**

- Novice (can support themselves in shallow water and are capable of moving short distance <5m)
- Intermediate (can support themselves in deep water and can swim a length of the pool)
- Advanced (can support themselves in deep water and can swim many lengths of pool)

Please indicate any special needs or disabilities i.e. Earplugs, floatation device.

Child 2 full name				Class					
Mon 18 <sup>th</sup> Sept	\$25.	Tues 19 <sup>th</sup> Sept		Wed 20 <sup>th</sup> Sept		Thu 21 <sup>st</sup> Sept		Fri 22 <sup>nd</sup> Sept	
Mon 25 <sup>th</sup> Sept	\$10	Tues 26 <sup>th</sup> Sept	\$10	Wed 27 <sup>th</sup> Sept		Thu 28 <sup>th</sup> Sept		Fri 29 <sup>th</sup> Sept	

All meals are provided during Vacation Care. Unless stated otherwise.

If it is a special celebration, ie. Birthday and you would like to bring a cake please inform staff at least 24 hours beforehand

**Child's Swimming Ability**  
**Swimming Ability:**

- Novice (can support themselves in shallow water and are capable of moving short distance <5m)
- Intermediate (can support themselves in deep water and can swim a length of the pool)
- Advanced (can support themselves in deep water and can swim many lengths of pool)

Please indicate any special needs or disabilities i.e. Earplugs, floatation device.

Child 3 Full name				Class					
Mon 18 <sup>th</sup> Sept	\$25.	Tues 19 <sup>th</sup> Sept		Wed 20 <sup>th</sup> Sept		Thu 21 <sup>st</sup> Sept		Fri 22 <sup>nd</sup> Sept	
Mon 25 <sup>th</sup> Sept	\$10	Tues 26 <sup>th</sup> Sept	\$10	Wed 27 <sup>th</sup> Sept		Thu 28 <sup>th</sup> Sept		Fri 29 <sup>th</sup> Sept	

All meals are provided during Vacation Care.unless stated otherwise.

If it is a special celebration, ie. Birthday and you would like to bring a cake please inform staff at least 24 hours beforehand

**Child's Swimming Ability**  
**Swimming Ability:**

- Novice (can support themselves in shallow water and are capable of moving short distance <5m)
- Intermediate (can support themselves in deep water and can swim a length of the pool)
- Advanced (can support themselves in deep water and can swim many lengths of pool)

Please indicate any special needs or disabilities i.e. Earplugs, floatation device.

**All meals are provide during Vacation Care.**

**If it is a special celebration, ie. Birthday and you would like to bring a cake please inform staff beforehand.**

**The service will be open 7:00am – 6:00pm**

## Planned Incursions/ Excursions for the **September 2017** holiday period.

For the service to take your child on an excursion and away from the OSHC premises your written authorisation is required. Please complete the form below for each Excursion your child is attending.

**\*\*Please note\*\***

- **A 14 days cancellation of booking period applies.**

- Risk assessments for each planned excursion are available for viewing at the OSHC office.

**1. Incursion/Excursion venue and address:** Cairns Aquarium - 5 Florence St, Cairns City QLD 4870  
**Excursion Date:** Monday 18<sup>th</sup> September

**Proposed activities to be undertaken:** To see the new aquarium which has just opened and to experience and learn about our reef around us then picnic lunch in Munro Martin Parkland.

**Method of transport:** Cairns Bus Charters

**Departure time:** 9.30am

**Return time** approx.: 2pm

**Period of time the children will be away from the service:** 4.5 hr

**Anticipated number of children to attend:** Approx 90

**Anticipated educator to child ratio:** 1/10

**2. Incursion/Excursion venue and address:** Swimming and Water play at Edge Hill School  
**Excursion date:** Thursday 21<sup>st</sup> September

**Proposed activities to be undertaken:** Swimming in School pool and Water Play throughout day.

**Method of transport:** N/A

**Departure time:** N/A

**Return time** N/A

**Period of time the children will be away from the service:** N/A

**Anticipated number of staff and adults to accompany and supervise the children:** Depends on swimming ability's.

**Anticipated number of children to attend:** Approx 90

**Anticipated educator to child ratio:**

- Novice** (can support themselves in shallow water and are capable of moving short distance <5m) Ratio 1/5  
 **Intermediate** (can support themselves in deep water and can swim a length of the pool) Ratio 1/8  
 **Advanced** (can support themselves in deep water and can swim many lengths of pool) Ratio 1/10  
 **Non swimmers** – will be restricted to water play only.

**3. Incursion/Excursion venue and address:** Tjapukai  
**Excursion date:** Friday 22<sup>nd</sup> September

**Proposed activities to be undertaken:**

The children will learn about the oldest living culture through dance and interactive demonstrations.

**Method of transport:** Cairns Bus Charters

**Departure time:** 8.45am

**Return time** approx.: 3.15 pm

**Period of time the children will be away from the service:** 6.5 hours

**Anticipated number of staff and adults to accompany and supervise the children:** 10

**Anticipated number of children to attend:** Approx 90

**Anticipated educator to child ratio:** 1/10

**4. Incursion/Excursion venue and address:** Laser Tag - At the service  
**Excursion date:** Monday 25<sup>th</sup> & Tuesday 26<sup>th</sup> September

**Proposed activities to be undertaken:** Laser tag is a tag game played with guns which fire infrared beams. Infrared-sensitive targets are commonly worn by each player and are sometimes integrated within the arena in which the game is played.

**Method of transport:** N/A

**Departure time:** N/A

**Return time** N/A

**Period of time the children will be away from the service:** N/A

**Anticipated number of staff and adults to accompany and supervise the children:** 7

**Anticipated number of children to attend:** Approx 90

**Anticipated educator to child ratio:** 1/15

**5. Incursion/Excursion venue and address:** Botanical Gardens and Lakes -Collins Ave and Greenslope Street

**Excursion Date:** 28<sup>th</sup> September

**Proposed activities to be undertaken:** To explore the gardens and nature take a walk through the boardwalk.

**Method of transport:** Walk

**Departure time:** 9.30am

**Return time** Approx.:1.30 pm 2pm

**Period of time the children will be away from the service:** 4.5 hours

**Anticipated number of staff and adults to accompany and supervise the children:** 10

**Anticipated number of children to attend:** Approx 90

**Anticipated educator to child ratio:** 1/10

**6. Incursion/Excursion venue and address:** Face painting, hair chalk/spray, nail polish at Service

**Excursion date:** Monday 18<sup>th</sup> Sept

**Proposed activities to be undertaken:** Face painting, nails or hair colour. Throughout program, upon children's request

**Method of transport:** N/A

**Departure time:** N/A

**Return time** N/A

**Period of time the children will be away from the service:** N/A

**Anticipated number of staff and adults to accompany and supervise the children:**

**Anticipated number of children to attend:** Approx 90

**Anticipated educator to child ratio:** 1/15

*Please write child/rens Name and Sign below*

Child 1

Child 2

Child 3

*I give permission for my child/ren to participate in the incursion/excursions as indicated on this form.*

1. Cairns Aquarium

2. Swimming and Water Play

3. Tjapukai

4. Laser Tag

5. Botanical Gardens and Centenary  
Lakes

6. Face Paint, Hair chalk Colour, nail  
polish

**Parent Name:**

**Signature:**

**Date:**