

Edge Hill State School P&C Association

Outside School Hours Care

Vacation Care Request for Booking

April 2024

The service will be open 6.45am – 6:00pm (11.25 hour sessions)

Please note: Our service must have received a completed 2023 enrolment form for each new child as well as a booking form before the child can commence care

Account Name - Parents Name	Last:	First Name:	
Current Address of Account Holder			
Phone Number	Home Number	Mobile Number	Work Number
Email Address			

All families must have a copy of their Child's Immunisation on file.

Fees for Vacation Care are \$77 per child per day, CCS will apply if applicable.

All surcharges are added to your account.

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.

All bookings require 2 weeks' notice for any Cancellations or fees still apply.

HOURS OF OPERATION ARE STRICTLY 6.45 am 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 persons stated on their 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.
- I/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 _____

Booking Form

Child 1	First Name	Last Name	Class
Full name			

Does your child have Allergies or Dietary Requirements? Yes /No If yes please give us information.

Please place an X in the white box for the days required. Leave blank if you don't require.

Mon 1/4/24	Tue 2/4/24	Wed 3/4/24	Thurs 4/4/24 Surcharge \$16.00	Fri 5/4/24
Mon 8/4/24	Tues 9/4/24 Surcharge \$35.00	Wed 10/4/24	Thurs 11/4/24	Fri 14/4/24 Surcharge \$10.00

Child 2	First Name	Last Name	Class
Full name			

Does your child have Allergies or Dietary Requirements? Yes /No If yes please give us information.

Please place an X in the white box for the days required. Leave blank if you don't require.

Mon 1/4/24	Tue 2/4/24	Wed 3/4/24	Thurs 4/4/24 Surcharge \$16.00	Fri 5/4/24
Mon 8/4/24	Tues 9/4/24 Surcharge \$35.00	Wed 10/4/24	Thurs 11/4/24	Fri 14/4/24 Surcharge \$10.00

Child 3	First Name	Last Name	Class
Full name			

Does your child have Allergies or Dietary Requirements? Yes /No If yes please give us information.

Please place an X in the white box for the days required. Leave blank if you don't require.

Mon 1/4/24	Tue 2/4/24	Wed 3/4/24	Thurs 4/4/24 Surcharge \$16.00	Fri 5/4/24
Mon 8/4/24	Tues 9/4/24 Surcharge \$35.00	Wed 10/4/24	Thurs 11/4/24	Fri 14/4/24 Surcharge \$10.00

All surcharges are added to your account.

Planned Incursions/ Excursions for the April 2024 holiday period.

For the service to take your child on an excursion and away from the OSHC premises or include them in an incursion your written authorisation is required.

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

1. Rainbow and Spa Day

Date: Wednesday 3rd April 2024

Proposed activities to be undertake: Face painting, Hairspray, Foot /Hand Spa and Nail polish

Time: All Day

Anticipated number of staff and adults to accompany and supervise the children: 1/15

Anticipated number of children to attend TBA

Anticipated educator to child ratio: 1/15

2. Excursion - venue and address: Inflatable Kingdom 164 Mayers Street Manunda **Prep to Grade 2**

All children need to bring a pair of socks to use the equipment.

Web site: <https://www.inflatablekingdom.com.au/>

Excursion date: Thursday 4th April 2024

Proposed activities to be undertake: Inflatable Kingdom provides an action-packed environment jump and play.

Method of transport: Walking

Time: We will leave the service at 9.30 am and return approx. 12.30 pm.

Time away from service – approx. 3 hours

Anticipated number of staff and adults to accompany and supervise the children: 1/10

Anticipated number of children to attend TBA

Anticipated educator to child ratio: 1/10

Surcharge \$16.00 per child added to your account

3. Excursion - venue and address: Skating 44 Behan Street Manunda **Grade 3 to 6 only**

Excursion date: Thursday 4/4/24

Proposed activities to be undertake: The children will practice their skills while having fun in a group session.

Method of transport: Walking

Time: We will leave the service at approx. 9.40 am and return approx. 12.15 pm

Time away from service - approx. 3.25 hours

Anticipated number of staff and adults to accompany and supervise the children: 1/10

Anticipated number of children to attend: TBA

Anticipated educator to child ratio: 1/10

Surcharge \$16.00 per child added to your account

4. Excursion - venue and address: Botanical Gardens/ Boardwalk and Centenary Lakes Nature Park. Greenslopes Steet and Collin Avenue.

Web site: <https://www.cairns.qld.gov.au/experience-cairns/botanic-gardens>

Excursion date: Tuesday 5/4/24

Proposed activities to be undertake: The children will walk to the Botanical Gardens and have time to go on nature walk, to the boardwalk, play on the Nature Playground or visiting the butterflies at the botanical gardens before returning to the service at approx. 2.30 pm **BYO Lunch**

Method of transport: Walking

Time: We will leave the service at 9.15 am and return approx. 2.30 pm

Time away from service - approx. 5.25 hours

Anticipated number of staff and adults to accompany and supervise the children: 1/10

Anticipated number of children to attend: TBA

Anticipated educator to child ratio: 1/10

5. Excursion - venue and address: Hartley's Crocodile Adventures Captain Cook Highway, Harry Freeman Drive, Lot 10, Wangetti Queensland 4871

Web site: <https://www.crocodileadventures.com/>

Excursion date: Friday 9/4/24

Proposed activities to be undertake: The children will bus it to the park and have a whole day of educational shows and time to explore the park. **BYO Lunch**

Method of transport: Cairns Bus Charters

Time: We will leave the service at 8.45 am and return approx. 3.40 pm

Time away from service - approx. 6 hours

Anticipated number of staff and adults to accompany and supervise the children: 1/10

Anticipated number of children to attend: TBA

Anticipated educator to child ratio: 1/10

Surcharge \$35.00 per child added to your account

6. Incursion - venue and address: Pedal Karts Cairns at the service

Web site : [www.pedalkartscairns.com .au](http://www.pedalkartscairns.com.au)

Incursion date: Friday 12/4/24 all day

Proposed activities to be undertake: A Day of fun where the children can be outdoors in the fresh air learning skills of driving the karts while learning the road rules.

Anticipated number of staff and adults to accompany and supervise the children: 1/10

Anticipated number of children to attend: TBA

Anticipated educator to child ratio: 1/10

Surcharge \$10.00 per child added to your account

Please fill in and sign below to give permission for your child/ren to take part in any Incursions/Excursions that you have booked on this booking form during this Vacation Care.

Child 1

Child 2

Child 3

I have read the information above about all incursions/excursion that my child/ren will attend.

I give permission for my child/ren to participate in the Incursion/Excursions as booked on this form.

Parent Name

Signature

Date