



# Vacation Care Consenting Written Agreement



**PLEASE BOOK CAREFULLY AS DAYS BOOKED CAN NOT BE CANCELLED**

**Booking Form April 2023**

**SURNAME:**

Week 1	Monday 17th 7:00-6:15pm Ole Ole! Bronze Day (\$62)	Tuesday 18th 7:00-6:15pm Misfit Movement Silver Day (\$72) Incursion Consent Form <input type="checkbox"/>	Wednesday 19th 7:00-6:15pm ICA Sportsworx Stephney Gold Day (\$82) Excursion Consent Form <input type="checkbox"/>	Thursday 20th 7:00-6:15pm Kid-Fun Festival Bronze Day (\$62)	Friday 21st 7:00-6:15pm Marine Discovery Centre Gold Day (\$82) Excursion Consent Form <input type="checkbox"/>
	Name Lunch	Name Lunch	Name Lunch	Name Lunch	Name Lunch <i>*Please specify your roll filling</i>
	Name Lunch	Name Lunch	Name Lunch	Name Lunch	Name Lunch
	Name Lunch	Name Lunch	Name Lunch	Name Lunch	Name Lunch
	Name Lunch	Name Lunch	Name Lunch	Name Lunch	Name Lunch
Week 2	Monday 24 <sup>th</sup> 7:00-6:15pm Mickster the Trickster Silver Day (\$72) Incursion Consent Form <input type="checkbox"/>	CLOSED 25 <sup>th</sup>	Wednesday 26 <sup>th</sup> 7:00-6:15pm Let's get crafty day Bronze Day (\$62)	Thursday 27 <sup>th</sup> 7:00-6:15pm Ingle Farm Roller-skating Gold Day (\$82) Excursion Consent Form <input type="checkbox"/>	Friday 28 <sup>th</sup> 7:00-6:15pm Wheels Day Bronze Day (\$62)
	Name Lunch		Name Lunch	Name Lunch	Name Lunch
	Name Lunch		Name Lunch	Name Lunch	Name Lunch
	Name Lunch		Name Lunch	Name Lunch	Name Lunch
	Name Lunch		Name Lunch	Name Lunch	Name Lunch

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## PLEASE REMEMBER YOUR CHILD NEEDS A DRINK BOTTLE AND THEY HAVE ENCLOSED FOOTWEAR

Staff supervising excursions will use the MEDICAL and EMERGENCY CONTACT INFORMATION you have already provided to the Vacation Care Program. **In the interests of accuracy please ensure that any relevant updates have been provided to OSHC.** Members of the excursion staff are responsible for the management of basic first aid. Please contact the Director or Assistant Director as soon as possible if you think your child may need additional health care support. Sufficient time is needed to arrange extra assistance for health support.

**Please note that planned excursions maybe cancelled prior if deemed unsafe for the children and staff such as extreme weather conditions.**

<b>Agreement</b>
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- I agree to delegate my authority to excursion staff. Excursion staff may take whatever disciplinary action they deem necessary to ensure the safety, well-being and successful conduct of students/children as a group and individually.
- In the event of any serious misbehaviour on the part of my child, I understand that I will be contacted and will be responsible for any costs associated with my child's return.
- In the event of an accident or illness and contact with me being impracticable or impossible, I authorise the staff member-in-charge to arrange whatever medical or surgical treatment a registered practitioner considers necessary. I will pay all medical and dental expenses incurred on behalf of my child.
- In the event of an accident or illness I consent to my child being transported to a hospital/medical/dental clinic by an excursion staff member in a school/private car or by ambulance if deemed necessary by staff.
- I have provided all information necessary for the school to plan safe and reasonable health care support my child. This includes, if relevant, information about any activity modifications my child may require for medical reasons.
- I consent to my child's doctor or medical specialist being contacted by medical personnel in an emergency.
- I agree that the information that has been given is up to date and accurate.
- I consent to my child viewing the programmed movies.
- I understand that the ratio of educator to child is 1:8 when on excursion, reaching up to 64 children.
- I understand that it is compulsory for my child to attend excursions if they are booked in on an excursion day.
- **I understand if I change my mind about the lunch option, I have pre-selected for my child I will be charged an additional \$3 for an alternative to be given.**

Signed \_\_\_\_\_

Date \_\_\_\_\_

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## Consent Forms

### Parent/Guardian Consent Misfit Movement

As a parent/guardian to \_\_\_\_\_ I give my consent for him/her/them to participate in:

The **Misfit Movement** incursion on **Tuesday 18<sup>th</sup> April 2023**. I understand children will be participating in choreographed hip hop dance routines. We will have an instructor come to teach the children in the Greenwith Community Centre. I read the details for the incursion on the program.

Signed \_\_\_\_\_ Date \_\_\_\_\_

### Parent/Guardian Consent ICA Sportzworx Stepney (Excursion Activity)

The visit to **ICA Sportzworx Stepney** on **Wednesday 19<sup>th</sup> April 2023**. I understand children will be travelling to the excursion by private bus. The bus will depart OSHC at 9:15am and arrive at the ICA Sportzworx Stepney at approx. 10am. The children will be having recess and lunch supplied by OSHC when we are at OSHC before and after the excursion. The bus will depart ICA Sportzworx Stepney at approx. 2:00 and arrive back at OSHC at approx. 2:45pm. I read the details for the excursion on the program.

As a parent/guardian to \_\_\_\_\_ I give my consent for him/her/them to participate in:

Signed \_\_\_\_\_ Date \_\_\_\_\_

### Parent/Guardian consent Marine Discovery Centre, Henley Beach (Excursion Activity)

As a parent/guardian to \_\_\_\_\_ I give my consent for him/her/them to participate in:

The Visit to the **Marine Discovery Centre, Henley Beach** on **Friday 21<sup>st</sup> April 2023**. I understand children will be travelling to the excursion by Private Bus. The bus will depart OSHC at 8:45am and arrive at the Marine Discovery Centre at approx. 9.45am. The children will be having recess and lunch supplied by OSHC at the venue. The bus will depart the Marine Discovery Centre at 2.00pm and arrive back at OSHC at approx. 3:00pm. I have read the details for the excursion on the program. We anticipate up to 64 children will share the excursion with 8 staff members supervising as per the 1:8 staff/child ratio. A risk assessment for the excursion has been completed and a COVID-safe plan provided.

Signed \_\_\_\_\_ Date \_\_\_\_\_

### Parent/Guardian Consent Mickster the Trickster

As a parent/guardian to \_\_\_\_\_ I give my consent for him/her/them to participate in:

The **Mickster the Trickster** on **Monday 24<sup>th</sup> April 2023**. I understand children will be participating in a magic show where a magician will teach children some magic tricks. The magician will come to OSHC. I read the details for the incursion on the program.

Signed \_\_\_\_\_ Date \_\_\_\_\_

### Parent/Guardian Consent Ingle Farm Roller-Skating (Excursion Activity)

As a parent/guardian to \_\_\_\_\_ I give my consent for him/her/them to participate in:

The visit to **Roller Skating Ingle Farm Recreation Centre** on **Thursday 27<sup>th</sup> April 2023**. I understand children will be travelling to the excursion by a Private Bus Company. The children will need to be at OSHC by 8.30am. The bus will depart OSHC at 9.00am and upon arrive at the venue, children will eat recess. Children will need to wear socks to participate in roller skating. Roller skates will be supplied at the venue; however, children are responsible for any skates brought from home. The children will eat lunch at the venue before the bus departs the recreation centre at 12.00pm and return to OSHC at approximately 12:30pm. We anticipate up to 60 children will share the excursion with 8 staff members supervising as per the 1:8 staff/child ratio. A risk assessment for the excursion has been completed and a COVID-safe plan provided.

Signed \_\_\_\_\_ Date \_\_\_\_\_

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