

# Vacation Care Enrolment Form



128 Ivanhoe Street Eden Hill WA 6054

PH: (08) 9377 3233

Email: sparxeh@optusnet.com.au

## Child Details (1)

Full name \_\_\_\_\_

DOB \_\_\_\_\_

Allergies, Food Intolerances, Medical condition \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

## Child Details (2)

Full name \_\_\_\_\_

DOB \_\_\_\_\_

Allergies, Food Intolerances, Medical condition \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

## Child Details (3)

Full name \_\_\_\_\_

DOB \_\_\_\_\_

Allergies, Food Intolerances, Medical condition \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

## Parent/Guardian information (1)

Title Mr Mrs Miss Ms Dr

Full Name \_\_\_\_\_

Relationship to child \_\_\_\_\_

Current address \_\_\_\_\_  
\_\_\_\_\_

Postcode \_\_\_\_\_

Contact Number \_\_\_\_\_

## Parent/Guardian information (1)

Title Mr Mrs Miss Ms Dr

Full Name \_\_\_\_\_

Relationship to child \_\_\_\_\_

Current address \_\_\_\_\_  
\_\_\_\_\_

Postcode \_\_\_\_\_

Contact Number \_\_\_\_\_

## Emergency Contacts

Please provide three emergency contacts **(they must be three people other than the enrolling guardians)**, if you are unable to provide three please see the director.

### Contact 1

Name \_\_\_\_\_

Relationship to child \_\_\_\_\_

Contact Number: \_\_\_\_\_

### Contact 2

Name \_\_\_\_\_

Relationship to child \_\_\_\_\_

Contact Number: \_\_\_\_\_

### Contact 3

Name \_\_\_\_\_

Relationship to child \_\_\_\_\_

Contact Number: \_\_\_\_\_

## Updated Information

*Is there any updated information that we need to be aware of?*

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

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## July Vacation Care Please tick the days you require

Date	Activity	Child 1	Child 2	Child 3
Mon 5 <sup>th</sup> July	Treasure Hunt Day			
Tue 6 <sup>th</sup> July	Wellington Square Playground			
Wed 7 <sup>th</sup> July	Games Vault Bus / Tech Day			
Thur 8 <sup>th</sup> July	*Cinemas			
Fri 9 <sup>th</sup> July	Rocket Car Building/Race			

Date	Activity	Child 1	Child 2	Child 3
Mon 12 <sup>th</sup> July	Kanyana Wildlife Park			
Tue 13 <sup>th</sup> July	*Laser Tag			
Wed 14 <sup>th</sup> July	Gaming / Movie Day PJs and Nachos			
Thur 15 <sup>th</sup> July	Yoga for Kids			
Fri 16 <sup>th</sup> July	Matagarup Bridge Walk and Picnic			

\*These activity days have a \$5 extra cost per child.

### Terms and Conditions

Flat rate for Vacation Care is \$77.00 per child per day.

Payments for Vacation Care are required a week in advance, if full payment is not made your child will be unable to attend the Vacation Care Program.

Childcare Subsidy is available.

If your child attends the Outside School hours Care Program your account must be paid up to date before your booking for Vacation Care will be accepted.

I acknowledge that my account must follow the guidelines as mentioned above.

Sign: \_\_\_\_\_

Date: \_\_\_\_\_

### PG Rated Movies

I give permission for my child to view PG rated movies.

Sign: \_\_\_\_\_

Date: \_\_\_\_\_

### Direct Debit Customers

Vacation Care is a higher cost than Before and After School therefore an adjustment to your regular direct debit payments need to be made. By signing below you agree to allow us to adjust your direct debit payments to cover the cost of Vacation Care.

Sign: \_\_\_\_\_

Date: \_\_\_\_\_

### Excursion Authorisation

This must be signed or your child will be unable to attend the excursions.

*\*Please note Excursion Plans and Risk Assessment available to sight from the OSHC coordinator..*

I give permission for my child/children to attend incursions/excursions for the July Vacation Care 2021.

I allow my child/children to be transported in the centre buses to and from the excursion venues.

I also give permission for the venue to be changed at short notice due to inclement weather.

Sign: \_\_\_\_\_

Date: \_\_\_\_\_

- **Bring lunch and water bottle with hat every day. No Food containing nuts**
- **Excursion days please ensure your child is at the centre before 10am**
- **Personal Electronics are not permitted except for Gaming Days – 7/7 and 14/7.**