HAHNDORF PRIMARY SCHOOL VACATION CARE PERMISSION NOTE FOR
DEC 2020/JAN 2021 EXCURSIONS & ACTIVITIES

Government of South Australia
Department for Education and Child Development

Day Planner Received

I hereby give permission for my child/ren to attend the excursion or participate in the activities as initialled below. I understand my child/ren will be travelling by bus (Lofty/Flagstaff Coach Services, Community Bus) or foot, to and from the excursion and that the staff ratio will be 1:15 for home days, 1:8 for excursions and 1:5 for water activities. Risk assessments have been prepared and are available for you to view at the service.

I understand that my child/ren will not attend any excursion or partake in activities not initialled and that if I cancel a booking I will be charged the full fee, less any Government entitlements.

I understand that my child is required to wear sunscreen and a full brimmed, bucket or legionnaire's hat when playing outside in the Sept and Christmas holidays, appropriate clothing and footwear (no thongs or strap tops) and that for swimming/water activities, t-shirts must be worn.

On excursion days - hats, water bottles and lunches will be supplied at an extra cost if my child/ren do not have their own. On excursions in the city, if by unforeseen circumstances, we are unable to return to OSHC via the freeway, an emergency collection point in the city will be: in the Botanical Gardens, Plane Tree Drive, opposite the toilet block. If an excursion is compromised due to weather, staffing or transport restrictions etc, an alternative outing at Mt Barker Cinema will be offered or activities back at the service. Excursion Phone only: **0434 604 568.**

Please supply your child with insulated storage for food and drinks. The service does not take responsibility for lost or damaged personal items.

In signing this form I acknowledge that I am responsible for fees, have read the Fire Danger Season Information Form, Daily Program Planner and am aware of the times, requirements, emergency contact numbers and procedures and any extra costs for my child/ren on that day.

I will supply the service, daily, the best possible contact telephone number in case of emergencies.

*Our program is subject to change but we will endeavour to inform you as soon as possible if this occurs.

Child/ren's Name & Age

1. _____   2. _____

3. _____   4. _____

PARENT/GUARDIAN SIGNATURE: --------------------------------

DATE	ACTIVITY	PARENT'S INITIALS
15/12/20	Incursion – Games 2U, Laser and water Tag games	_____
16/12/20	Excursion - Bus trip with Lofty Coaches to Wallis Cinemas for movie "The Croods 2" and Disco	_____
22/12/20	Incursion – Clock Making Workshop	_____
04/01/21	Local Walk to Hahndorf Bowling Club & Ice cream	_____
06/01/21	Excursion – Bus trip with Flagstaff Coaches to Zone Bowling stopping at 2 P/G for snacks	_____
07/01/21	Incursion – Art Workshop	_____
11/01/21	Incursion – Tie Dye a T Shirt, please circle required size/s 6 8 10 S M L	_____
	We will endeavour to supply indicated size if booked before 23/12/20. Plus Henna painting with Nicole Brooks	
12/01/21	Bus trip with Flagstaff Coaches via freeway, to The Beachouse, lunch at P/G weather permitting	_____
18/01/21	Local walk to The Mineral shop, Main St Hahndorf	_____
19/01/21	Incursion – Animal Farm visit	_____
20/01/21	Bus trip with Flagstaff Coaches via freeway to Latitude, Lunch at a P/G weather permitting	_____

PLEASE TICK THE BOX FOR CONSENT

Supervised walks to local playgrounds or local area	☐	Participate in water activities at OSHC	☐
Face paints / hair spray / nail polish	☐	Appear in photos for OSHC newsletter/website	☐
Watch PG Movies deemed appropriate	☐	Supervised use of hot glue guns	☐

HAHNDORF PRIMARY SCHOOL
CHRISTMAS VACATION CARE BOOKING FORM

I wish to book my child/ren into Vacation Care on
the dates indicated on the grid please.

<u>Please indicate the number of children per session.</u>
<u>Children's names:</u>

1. _____

2. _____

3. _____

4. _____

I AGREE TO THE LISTED CONDITIONS OF MY CHILD'S RECENT ENROLMENT FORM AND UNDERSTAND THAT I AM RESPONSIBLE FOR PAYMENT OF FEES EACH WEEK. NO CANCELLATION OF BOOKINGS WILL BE ACCEPTED AFTER THE END OF THE SECOND TO LAST WEEK OF THE SCHOOL TERM. ANY NON-ATTENDANCE WILL BE RECORDED AS ALLOWABLE ABSENCES FOR CCS PURPOSES.

Dear Parents,

For CCS reductions please make sure that you are registered for approved childcare with Centrelink (13 61 50). If 14 weeks have lapsed between your child's last attendance, a new CWA with us must be approved by you on the Xplor website and then refresh your details on myGov before your child attends. 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, costs and requirements for each day that your child attends.

Parent name_____

SIGNATURE _____

Contact number _____

Approx arrival time_____   DATE OF BOOKINGS _____

Mon 14/12	Tue 15/12 Incursion	Wed 16/12 Excursion	Thu 17/12	Fri 18/12
Mon 21/12	Tue 22/12 Incursion	Wed 23/12	Thu 2412	Fri 25/12
			Closed	Closed
Mon 28/12	Tue 29/12	Wed 30/12	Thu 31/12	Fri 1/1
Closed	Closed	Closed	Closed	Closed
Mon 4/1	Tue 5/1	Wed 6/1 Excursion	Thu 7/1 Incursion	Fri 8/1
Mon 11/1 Incursion	Tue 12/1 Excursion	Wed 13/1	Thu 14/1	Fri 15/1
T Shirt Size/s				
Mon 18/1	Tue 19/1 Incursion	Wed 20/1 Excursion	Thu 21/1	Fri 22/1