

Xavier Outside School Hours Care

JULY 2017 VACATION CARE BOOKING FORM

Child/Children Details

Child 1: Name _____ Date of Birth _____

Is your child affected by any of the following conditions (please tick)

- Anaphylaxis - please provide an action plan to staff and any medication required*
- Asthma - please provide an action plan to staff and medications required*
- Medical condition - please provide a care plan*
- Disability - please provide a care plan*

Child 2: Name _____ Date of Birth _____

Is your child affected by any of the following conditions (please tick)

- Anaphylaxis - please provide an action plan to staff and any medication required*
- Asthma - please provide an action plan to staff and medications required*
- Medical condition - please provide a care plan*
- Disability - please provide a care plan*

Child 3: Name _____ Date of Birth _____

Is your child affected by any of the following conditions (please tick)

- Anaphylaxis - please provide an action plan to staff and any medication required*
- Asthma - please provide an action plan to staff and medications required*
- Medical condition - please provide a care plan*
- Disability - please provide a care plan*

Family acknowledgement;

I have checked the information contained in my child's enrolment form and have ensured that all information contained in that document is correct and/or have provided updated details as required.

Signed _____ Name _____

Emergency contact number: Date ____/____/____

Please tick required days:

Monday 3 rd July Naidoc Week	Tuesday 4 th July Excursion Movies	Wednesday 5 th July Sustainable Crafts	Thursday 6 th July Incursion Birds of Prey	Friday 7 th July Challenge Day

Monday 10 th July	Tuesday 11 th July	Wednesday 12 th July	Thursday 13 th July	Friday 14 th July
Incursion Laser Quest	CSI Day	Lego Day	Excursion Hudson Circus	Egyptian Party

***** PLEASE SIGN INCURSION/EXCURSION
PERMISSION'S OVER THE PAGE*****

****An Excursion Plan/Risk Assessment will be completed and available for excursions****

****Ratio of Educators to Children for Excursions is 1-8 for Hudson Circus and 1:10 for Grand Cinemas****

****A list of Emergency Contact Details for each child is taken on excursions****

Booking conditions

- Please choose carefully as once booked unfortunately days are unable to be changed.
- Please note fees will be invoiced on Monday 10th July 17 for the first week (with CCB & CCR payments deducted) and on Monday 17th July 17 for the second week. All fees are payable by Monday 24th July 17 unless arrangements have been made with the Supervising Officer, Lyn Baxter.

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INCURSION/EXCURSION PERMISSIONS

Please tick the incursions/excursions that you give your child/children permission to attend and participate in.

- | | | |
|--------------------------|-------------------------------------|---|
| <input type="checkbox"/> | Tuesday 4 th July 2017 | <u>Excursion-Grand Cinemas</u>
Jull St and Third Rd Armadale 6112
Travelling by bus from Metro Buses
<u>Departing:</u> 11.30pm <u>Returning:</u> 2.30pm |
| <input type="checkbox"/> | Thursday 6 th July 2017 | <u>Incursion-WA Birds of Prey</u>
<u>Time:</u> 10.30am-11.30am |
| <input type="checkbox"/> | Monday 10 th July 2017 | <u>Incursion-Mobile Laser Quest</u>
<u>Time:</u> 12.30pm-2.30pm |
| <input type="checkbox"/> | Thursday 13 th July 2017 | <u>Excursion-Hudson Circus</u>
Langley Park, Riverside Drive, Perth
Travelling by bus from Metro Buses
<u>Departing:</u> 9.30am <u>Returning:</u> 2.30pm |

*** I would like to order a popcorn and drink combo for the movies excursion on 4th July 17 and authorise \$7.50 to be charged to my account ****

Small Popcorn Drink: Water Lemonade

Parents/Guardians Name: Signature:Date: