



Queenstown OSHC School Holiday Care

8 Selby Street, Queenstown

P: 6375 1800

E: queenstown@ncn.org.au

School Holiday Care Booking Form

Parent/Guardian Name: _____

Contact number & email: _____

Please read through carefully and complete this Booking Sheet

(please ✓ days required) **BOOKINGS WILL BE TAKEN VIA THIS FORM ONLY**

	Monday	Tuesday	Wednesday	Thursday	Friday
Date	6/7/2020	7/7/2020	8/7/2020	9/7/2020	10/7/2020
Program Planned Days	In House	In House	In House	In House	In House
Name of Child/ren					

	Monday	Tuesday	Wednesday	Thursday	Friday
Date	13/7/2020	14/7/2020	15/7/2020	16/7/2020	17/7/2020
Program Planned Days	In House	In House	In House	In House	In House
Name of Child/ren					

	Monday	Tuesday	Wednesday	Thursday	Friday
Date	20/7/2020	Back			
Program Planned Days	In House	To			
Name of Child/ren		School			

I have read the Queenstown School Holiday Program and conditions, and fully understand all I requirements.
 I will ensure that my child/ren is/are fully equipped as specified on the program.
 I agree to abide by all requirements including payment of fees, cancellations and absences.
 I have also read and fully completed the non-routine excursion form.

Signed: _____

Date: _____



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Non-Routine Excursion Consent Form

I, Parent/Guardian
(Parent/Guardian Name)

of
(Child/ren's Full Names)

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Give permission for them to participate in an excursion to:

- *Please circle Yes or No to excursions applicable to your child/ren.***
- **Note most times will depend on the weather and will be confirmed.***

DATE	TIME	DESTINATION	Walk	CONSENT

Hazards identified are:

- Children being on unregistered premises.
- Access to traffic – i.e. crossing roads.
- Challenging play equipment (different parks) and sports activities.
- Activities in open areas.
- Water.

Management of identified hazards will include:

- Minimum ratio of one adult to ten children on excursions.
- Minimum ratio of one adult to five children on swimming excursions.
- A person who holds a bronze medallion will be available at every swimming outing.

Hazards will vary depending on the excursion planned on the day. The activities that are available on each excursion vary and the purposes of all excursions are to provide children with recreational and educational experiences.

I consent to my child/ren travelling by bus or walking to the excursion.

Signed:
(Parent/Guardian)

Date:

This form is to be completed prior to children attending excursions