

HALLETT COVE R-12 OSHC

OCTOBER VACATION CARE BREAK 2016 Booking Sheet

Childs Name:

Age:

OCTOBER 2016	MON 3RD	TUE 4TH	WED 5TH	THUR 6TH	FRI 7TH
ENTER TIMES IN THE BOX	PUBLIC HOLIDAY	Deconstruction / Craft Day	Cleland Wildlife Park	Inflatable World	Mad Hatters Tea Party
Enter arrival time in box					
Enter departing time in box					

OCTOBER 2016	MON 10TH	TUE 11TH	WED 12TH	THUR 13TH	FRI 14TH
ENTER TIMES IN THE BOX	Games to U	Challenge Hill	Discover Asia	Latitude	PJ, Movie & Party Day
Enter arrival time in box					
Enter departing time in box					

Hallett Cove OSHC October

Vacation Care 2016 Consent Sheet

Please sign your consent for your child/ren to participate in any excursion they will be attending.

Date: Wednesday 5th October 2016

Time: 9:00- 3:00pm

I consent to _____ taking part in the excursion to **Clelands Wildlife Park, 365 Mouny Lofty Summit Road, Crafers**. A chartered coach will transport my child/ren to and from the venue. We propose that 80 children will participate on this excursion, with a ratio of 1:8, meaning 10 staff will be supervising. There has been a risk assessment prepared for this excursion and is available for viewing, if you wish, please just ask staff.

Parent/Guardian signature: _____ Date: _____

Date: Thursday 6th October 2016

Time: 8:30 - 2:00pm

I consent to _____ taking part in the excursion to **Inflatable World, 205-207 Main South Road, Morphett Vale & then Jubilee Park Playground, Saitfleet Street, Port Noarlunga** for lunch. A chartered coach will transport my child/ren to and from the venue. We propose that 80 children will participate on this excursion, with a ratio of 1:8, meaning 10 staff will be supervising. There has been a risk assessment prepared for this excursion and is available for viewing, if you wish, please just ask staff.

Parent/Guardian signature: _____ Date: _____

Date: Tuesday 11th October 2016

Time: 9:00 - 3:00pm

I consent to _____ taking part in the excursion to **Challenge Hill at Woodhouse Activity Centre, 37 Spring Gully Road, Piccadily**. A chartered coach will transport my child/ren to and from the venue. We propose that 80 children will participate on this excursion, with a ratio of 1:8, meaning 10 staff will be supervising. There has been a risk assessment prepared for this excursion and is available for viewing, if you wish, please just ask staff.

Parent/Guardian signature: _____ Date: _____

Date: Thursday 13th October 2016

Time: 8:30am - 2:30pm

I consent to _____ taking part in the excursion to **Latitude, 13-15 Fosters Road, Greenacres & then O G Road Playground, 8 O G Road, Klemzig**. A chartered coach will transport my child/ren to and from the venue. We propose that 80 children will participate on this excursion, with a ratio of 1:8, meaning 10 staff will be supervising. There has been a risk assessment prepared for this excursion and is available for viewing, if you wish, please just ask staff.

Parent / Guardian signature: _____ Date: _____
