Welcome to Pulteney Grammar’s Vacation Care Program. We aim to provide a safe, relaxed environment where children can enjoy their holiday & learn a little too! Come check us out and spend the day with some friends 😊

The Important Stuff…

* The Centre is open from 8am to 6pm. It is the responsibility of the parent / carer to ensure they are signed in and out daily. Our usual late collection fees apply as described in the parent handbook.

* To enrol your child please complete the following form and return to the OSHC room by Friday the 19th June. Any bookings after this date will be considered late, and a $5 per child, per day, late fee will apply.

* Cost of care is $56 per day, with any extra costs associated with excursions / incursions added to the day requested. Any extra costs are listed next to the booking form, and will appear on your invoice.

* Bookings are final & unfortunately we cannot provide refunds for cancellations unless a medical certificate is received for the day/s in question. Booking transfers can no longer be arranged due to the differing costs of each day, so please consider this when booking.

* On excursion days, children must be at the Centre by 9am at the latest (we cannot hold up the bus).

* The Program is a guide only, and changes may occur (however you will be notified if so). Excursions and incursions are compulsory for the day and are therefore included in the cost of care.

* Children MUST bring their own morning tea & lunch unless otherwise stated in the program.

* Children MUST wear appropriate clothing, including sun-hats and sun-screen when required. On days involving water, bring a change of clothes and a rash top!

* Please note some excursions are on a first come, first serve basis, so book in early to ensure a spot.

* Electronics from home are no longer permitted at OSHC, bring them and they’ll stay in the bag all day 😊

* Any other questions, email Adam or Ali :)
APPLICATION FOR VACATION CARE

I __________________________ of __________________________
(Name of Parent) (Address)
wish to apply for my child's/children's inclusion in the Vacation Care Program to be conducted from Monday the 29th of June 2015 to Monday the 20th July 2015.

Contacts

Contact’s name: ___________________________________ Phone: _____________________ Email ______________________

Secondary Contact’s name: ___________________________________ Phone: _____________________ Email ______________________

Emergency Contact’s name: ___________________________________ Phone: _____________________ Email ______________________

NAME OF CHILD/CHILDREN: ___________________ Date of Birth: _______ CLASS: ______

____________________ Date of Birth: _______ CLASS: ______

____________________ Date of Birth: _______ CLASS: ______
Care will be required on the following days.

<table>
<thead>
<tr>
<th>Date / Activity</th>
<th>Additional Cost</th>
<th>Please Tick Box if Required</th>
</tr>
</thead>
<tbody>
<tr>
<td>Monday 29th June – Pulteney TV (Talent Show)</td>
<td>Nil</td>
<td>□</td>
</tr>
<tr>
<td>Tuesday 30th June – Krusty Krab Cooking Day</td>
<td>$7</td>
<td>□</td>
</tr>
<tr>
<td>Wednesday 1st July – Circus Skills</td>
<td>Nil</td>
<td>□</td>
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<tr>
<td>Thursday 2nd July – Pulteney Popstars</td>
<td>Nil</td>
<td>□</td>
</tr>
<tr>
<td>Friday 3rd July – Lollipops or Ice Skating</td>
<td>Lollipops - $8 + $8.50 for Bus</td>
<td>Lollipops - □</td>
</tr>
<tr>
<td>Ice-Skating - $11 + $8.50 for Bus</td>
<td>Ice Skating - □</td>
<td></td>
</tr>
<tr>
<td>Monday 6th July – “Addam’s Family” Pantomime</td>
<td>$10 + (Bus $8.50)</td>
<td>□</td>
</tr>
<tr>
<td>Tuesday 7th July - Cops</td>
<td>Nil</td>
<td>□</td>
</tr>
<tr>
<td>Wednesday 8th July – Mega Zombie Bouncy Castle</td>
<td>$10</td>
<td>□</td>
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<tr>
<td>Thursday 9th July – In House Movie Day</td>
<td>Nil</td>
<td>□</td>
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<tr>
<td>Friday 10th July – Footsteps Disco</td>
<td>$8</td>
<td>□</td>
</tr>
<tr>
<td>Monday 13th July – Movie Day “Minions” (PG)</td>
<td>$8.50 + $8.50 for Bus</td>
<td>□ With Snack Deal</td>
</tr>
<tr>
<td>Optional Snack Deal $7 (Choc top &amp; Popcorn)</td>
<td>□ Without Snack Deal</td>
<td></td>
</tr>
<tr>
<td>Tuesday 14th July – QUIZ Day</td>
<td>Nil</td>
<td>□</td>
</tr>
<tr>
<td>Wednesday 15th July – Ace’s Magic Show</td>
<td>$8</td>
<td>□</td>
</tr>
<tr>
<td>Thursday 16th July – Scrap Challenge</td>
<td>Nil</td>
<td>□</td>
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<tr>
<td>Friday 17th July – Next Gen Little Ninja’s</td>
<td>$6</td>
<td>□</td>
</tr>
<tr>
<td>Monday 20th July – Animal Caper’s</td>
<td>$7</td>
<td>□</td>
</tr>
</tbody>
</table>
If the below details have not changed since your previous Vacation Care Booking with OSHC; therefore you agree with the arrival and pick-up procedures, you consent to your child being taken on excursions, your medical details have not changed, and you agree to our medical policy in case of an emergency, please sign and date below and leave the rest of the form blank.

Parent's/Guardian's Signature: ___________________________ ___ / ___ /___

If you have not completed these details this year, please complete them below.

Names of additional persons who may collect my child/children:
__________________________________________ Phone #____________
__________________________________________ Phone #____________
__________________________________________ Phone #____________
__________________________________________ Phone #____________

I am aware of arrival and pick-up procedures for my child/children at the Pulteney Grammar Vacation Care Centre, have read and understood the policy and accept the conditions as set out.

Parent's/Guardian's Signature: ___________________________ ___ / ___ /___

Medical Information: Please list any medical conditions and necessary treatment.
__________________________________________
__________________________________________
__________________________________________

In Vacation Care we sometimes use face paint.

Do we have your approval to paint your child's face? Yes ☐ No ☐

In Vacation Care we sometimes watch videos. Do we have your permission to watch

G Rated Videos ☐ PG Rated Videos ☐ Both ☐

I consent to _______________________________ taking part in day excursions and leaving the school grounds during Vacation Care.
MEDICAL ATTENTION IN CASE OF EMERGENCY:

In the case of accident or emergency, every effort will be made to contact parents/guardians prior to seeking treatment. In the event of my child receiving injuries requiring urgent medical attention, I authorise the seeking of that medical attention and agree to pay all costs incurred on behalf of my child.

Name of doctor: _____________________________________________

Phone No.: ____________________________

Name of dentist: _____________________________________________

Phone No.: ____________________________