



HOLIDAY CARE ENROLMENT

JUNE/JULY 2017

CONFIDENTIAL DETAILS, CHILD 1

First Name(s):

Surname:

Northside

ELC

Southside

Junior School

Child CRN:

Child DOB:

CONFIDENTIAL DETAILS, CHILD 2

First Name(s):

Surname:

Northside

ELC

Southside

Junior School

Child CRN:

Child DOB:

CONFIDENTIAL DETAILS, CHILD 3

First Name(s):

Surname:

Northside

ELC

Southside

Junior School

Child CRN:

Child DOB:

CCB/CCR REGISTERED PARENT/GUARDIAN 1 DETAILS

Relationship to the child(ren): Mother Father Other

Are you the parent/guardian registered to claim Childcare benefit (CCB) and/or Childcare Rebate through the Department of Human Services? Yes No

Surname:	First name:
Date of birth:	CRN:
Address:	
Mobile:	Work phone:
Email:	

PARENT/GUARDIAN 2 DETAILS

Relationship to the child(ren): Mother Father Other

Surname:	First name:
Date of birth:	CRN:
Address:	
Mobile:	Work phone:
Email:	

BOOKING INFORMATION

WEEK 1	Mon 26 June	Tues 27 June	Wed 28 June	Thurs 29 June	Fri 30 June
WEEK 2	Mon 3 July	Tues 4 July	Wed 5 July	Thurs 6 July	Fri 7 July
WEEK 3	Mon 10 July	Tues 11 July	Wed 12 July	Thurs 13 July	Fri 14 July
WEEK 4	Mon 17 July				

PERMISSION FORM AND EXCURSIONS:

ALL CHILDREN

I give permission for my child(ren) to watch PG rated Movies.

Signed:

Date:

ALL CHILDREN

I give permission for my child(ren) photos to be used in:

Reflections/Portfolio	Yes	No
CGS Connect	Yes	No
Promotional Material	Yes	No

Signed:

Date:

ALL CHILDREN

I give permission for my child(ren) to participate in the following activity:

To: WALK TO MOUNTAINS AND PARKS AROUND THE LOCAL AREA

Signed:

Date:

JUNIOR SCHOOL

I give permission for my child(ren) to participate in the following activity:

To: GREEN SHED

Date: Tuesday 27 June

Transport: Q City Transit Group

Departure Time Approx: 9:30am

Return Time Approx: 12:30pm

Signed:

Date:

ELC/NORTHSIDE

I give permission for my child(ren) to participate in the following activity:

To: LOLLIPOPS PLAYGROUND

Date: Wednesday 28 June

Transport: Q City Transit Group

Departure Time Approx: 9:30am

Return Time Approx: 1:30pm

Signed:

Date:

ALL CHILDREN

I give permission for my child(ren) to participate in the following activity:

To: QUESTACON

Date: Friday 29 June

Transport: Q City Transit Group

Departure Time Approx: 9:30am

Return Time Approx: 2:30pm

Signed:

Date:

NORTHSIDE/SOUTHSIDE/JUNIOR SCHOOL

I give permission for my child(ren) to participate in the following activity:

To: LIMELIGHT CINEMAS 'DESPICABLE ME 3'

Date: Monday 3 July

Transport: Q City Transit Group

Departure Time Approx: 9:30am

Return Time Approx: 12:30pm

Signed:

Date:

ELC/SOUTHSIDE

I give permission for my child(ren) to participate in the following activity:

To: FLIP OUT MITCHELL

Date: Tuesday 4 July

Transport: Q City Transit Group

Departure Time Approx: 9:30am

Return Time Approx: 12:30pm

Signed:

Date:

JUNIOR SCHOOL

I give permission for my child(ren) to participate in the following activity:

To: ROCK CLIMBING MITCHELL

Date: Thursday 6 July

Transport: Q City Transit Group

Departure Time Approx: 9:30am

Return Time Approx: 12:30pm

Signed:

Date:

ELC/SOUTHSIDE/NORTHSIDE

I give permission for my child(ren) to participate in the following activity:

To: BELCONNEN COMMUNITY CENTRE CHILD PLAYERS 'CHARLIE AND THE CHOCOLATE FACTORY'

Date: Friday 7 July

Transport: Q City Transit Group

Departure Time Approx: 9:30am

Return Time Approx: 12:30pm

Signed:

Date:

JUNIOR SCHOOL

I give permission for my child(ren) to participate in the following activity:

To: CORIN FOREST

Date: Monday 10 July

Transport: Q City Transit Group

Departure Time Approx: 9:30am

Return Time Approx: 2:30pm

Signed:

Date:

JUNIOR SCHOOL

I give permission for my child(ren) to participate in the following activity:

To: ZONE 3 BELCONNEN

Date: Tuesday 11 July

Transport: Q City Transit Group

Departure Time Approx: 9:30am

Return Time Approx: 12:30pm

Signed:

Date:

ALL CHILDREN

I give permission for my child(ren) to participate in the following activity:

To: INFLATABLE WORLD

Date: Wednesday 12 July

Transport: Q City Transit Group

Departure Time Approx: 9:30am

Return Time Approx: 1:30pm

Signed:

Date:

SOUTHSIDE/NORTHSIDE

I give permission for my child(ren) to participate in the following activity:

To: CANBERRA THEATRE 'MAD HATTERS TEA PARTY'

Date: Thursday 13 July

Transport: Q City Transit Group

Departure Time Approx: 9:30am

Return Time Approx: 12:30pm

Signed:

Date:

ELC/SOUTHSIDE/JUNIOR SCHOOL

I give permission for my child(ren) to participate in the following activity:

To: GREATER UNION MANUKA 'CARS 3'

Date: Monday 17 July

Transport: Walking

Departure Time Approx: 9:30am

Return Time Approx: 1:30pm

Signed:

Date:

NORTHSIDE

I give permission for my child(ren) to participate in the following activity:

To: GREATER UNION MANUKA 'CARS 3'

Date: Monday 17 July

Transport: Q City Transit Group

Departure Time Approx: 9:30am

Return Time Approx: 2:20pm

Signed:

Date:

JUNIOR SCHOOL ONLY

I give permission for my child(ren) to participate in the following activity:

To: Go Swimming at CGS POOL

Non Swimmer

Can swim unaided 25 Mtrs

Can float

Can swim unaided 50 Mtrs

Can swim correct style for 10 Mtrs

Can swim unaided 100 Mtrs

Signed:

Date:

PLEASE NOTE:

- **Children cannot participate in the excursion without signed consent from a parent/guardian**
- While on excursions ratios are maintained at 1:8 or 1:5 near water, or below at all times. A risk assessment has been prepared and is available for all excursions; and
- All payments for CGS Care Services are to be made by direct debit. Forms are available on CGS connect at ELC Reception or by emailing cgscare@cgs.act.edu.au

Parent/Guardian 1 Name:

Parent/Guardian 1 Signature:

Date:

Parent/Guardian 2 Name:

Parent/Guardian 2 Signature:

Date:

Please return completed form to cgscare@cgs.act.edu.au or to any school reception.