

# Skoolzout@Parameadows | School holiday program booking form

Please complete this form and return it to the Director via post to Skoolzout@Para Meadows, PO Box 118, Unanderra NSW 2526 or fax to 4272 5683 by Friday 29 March 2013. Please Note: Due to high numbers of children typically enrolling in the holiday services, days you request may not be available.

## BOOKING CONFIRMATION

You will receive a phone call to confirm your booking.

## SERVICE CONTACT NUMBERS (during school holidays)

Service Director 0421 347183

## CHILD 1

Given Names: \_\_\_\_\_ Family Name: \_\_\_\_\_  
Gender: \_\_\_\_\_ Date of Birth: \_\_\_\_\_  
Legal Guardian: \_\_\_\_\_ Contact Number: \_\_\_\_\_  
Postal Address: \_\_\_\_\_  
Email Address: \_\_\_\_\_

## CHILD'S INDIVIDUAL NEEDS

To assist staff with effective programming for your child, please detail your child's additional needs:

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## HEALTH DETAILS

Name of Family Doctor: \_\_\_\_\_ Phone number: \_\_\_\_\_  
Address: \_\_\_\_\_  
Medicare Number: \_\_\_\_\_ Health Care Card No.: \_\_\_\_\_  
Private Health Fund?:  Yes  No Fund Name: \_\_\_\_\_  
Fund Memberhsip No.: \_\_\_\_\_ Do you have Ambulance Cover?:  Yes  No

## MEDICATION

If your child will require the administration of medication whilst in our care these school holidays, please fill out an Big Fat Smile Authorisation and Administration of Medication Form at the service.

The following information will assist staff to meet the individual needs of your child:

Task	Assistance required			Task	Assistance required		
	Total	Some	None		Total	Some	None
Dressing				Drinking			
Washing hands				Toileting			
Eating							

Does your child require mobility aids?  Yes  No (if yes, please specify)

Does your child require communication aids?  Yes  No (if yes, please specify)

Does your child have any food sensitivities or allergies we should know about?

Yes  No  (if yes, please specify and attach Emergency Action Plan)

Please include information to assist us in addressing your child's interest/needs these school holidays (eg: favourite toy / special interest / rewards):

Does your child receive support from any other organisations? Yes  No  (if yes, please specify)

Name of Organisation: \_\_\_\_\_

Name of Caseworkers: \_\_\_\_\_

Contact Number: \_\_\_\_\_

**RESPITE CARE**

Will your child be accessing Respite Care during these school holidays? Yes  No

Children going to respite care during school holidays can attend on non-respite care days.

**EXCURSIONS**

As part of the school holiday program, the centre staff would like to take the children on a walk or drive around the local area. These walks/drives will occur at various times throughout the school holidays and will be fully supervised, with a minimum of one carer to every two children. The drives will be for sightseeing only. We will seek your permission to include these outings within the school holiday program. Please sign below to give your consent.

I, \_\_\_\_\_, give permission for my child to participate in walks/drives around the local area at various times throughout the school holiday program.

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Permission to contact child's school:**

The school holiday program should build on and complement strategies in place for your child's schooling.

Do you give permission for Big Fat Smile to contact your child's school? Yes  No

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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Please indicate the number of children you wish to attend per day in the spaces provided below. Details about each day's activities can be found in the program.

## Week 1.

	Activity	No. of Children	Transport	Please Sign
Monday 15	Backyard Adventures		-	
Tuesday 16	Wet 'n' Wild		Private Bus	
Wednesday 17	Skoolzout Masterchef		-	
Thursday 18	Brilliant Bubbles!		-	
Friday 19	Art-rageous		-	

## Week 2.

	Activity	No. of Children	Transport	Please Sign
Monday 22	Harbourside Drive		Private Bus	
Tuesday 23	Making Music		-	
Wednesday 24	Integral Energy Park		Private Bus	
Thursday 25	Public holiday - no service	-	-	-
Friday 26	Fun Day Friday		-	

### Important information

#### What to Bring:

- Hat, enclosed shoes, shirts/tops with sleeves
- A drink bottle
- Lunch every day, unless otherwise specified

**Challenging Behaviours:** Big Fat Smile reserves the right to review a child's access to all or part of the holiday program if their behaviour affects their safety or the safety of other children or staff.

**Medication Information:** If your child requires medication whilst in our care, you will need to fill out a Medication Form (available at the centre). Medication must be in the original packaging and have the child's name and doctor clearly indicated.

**Absences:** Please inform the centre as early as possible if your child/ren will be absent on an enrolled day. Please note that fees for absences will be charged to your account unless 2 days notice is given.

**Excursion Information:** It is important that you check the departure times for all excursions. Big Fat Smile staff members are unable to return for children who arrive late for excursions. Anticipated numbers: 14 children, 1:2 ratio - 6-7 staff. Risk assessments have been completed for all excursions, please see staff if you would like a copy.

**Fees:** Fees start from as little as \$16.90 per day with Child Care Benefit. Even less with 50% rebate for working families. For more information regarding your entitlements, call the Family Assistance Office on 13 61 50.