

Vacation Care Program

Monday 15 April – Monday 29 April 2019

**Monday
15 April**

Talent Quest

Can you sing, dance or do magic tricks? Let's find out when we have our very own Talent Quest.



**Tuesday
16 April**

Today we will be creating Easter crafts. Come along with some ideas and we will provide the materials.



**Wednesday
17 April**

Village Cinemas
We will be going to the cinemas today for a movie. We will take some nibbles to share.

Extra cost: \$15.00

**Thursday
18 April**

Let's do some baking today. How does chocolate Easter Egg Moulds and other Easter goodies sound?



**Friday
19 April**

Good Friday
Public Holiday

No Vacation Care
Today

**Monday
22 April**

Easter Monday
Public Holiday

No Vacation Care
Today



**Tuesday
23 April**

Easter Tuesday
Public Holiday

No Vacation Care
Today



**Wednesday
24 April**

Park Life Cafe

Today we will be heading down to Kingston for a fun day on the play equipment.

Depart: 10.30am
Extra cost: \$10.00

**Thursday
25 April**

Anzac Day
Public Holiday

No Vacation Care
Today



**Friday
26 April**

Today will be an action packed day. We will be riding the Plasma Cars at Great Escape, and then heading to McDonalds for an icecream.

Depart: 10.30am
Extra cost: \$10.00

If you require care for the **April School Holidays**, please book your child in by **Friday 29 March 2019**. The program opens at 8:30am and continues through to 6:00pm. The cost will be \$52.00 per day, or \$37.00 if your child is collected prior to 1.00pm.

If you need to drop your child off prior to 8.30am, please advise the College Office so we can make staff available.

The attached booking form and enrolment form must be signed and completed.

Please ensure that your child is dressed suitably for play and comfort, with clothing appropriate to the weather conditions. Morning and afternoon teas are provided, so please pack a lunch unless otherwise notified. As the children often participate in outdoor activities, beanies and suitable footwear should be worn. We recommend sneakers, or enclosed shoes for all Vacation Care Programs.

**Monday
29 April**

Party Day!

Let's celebrate the last day of the holidays by having a party! Bring along a plate of party food to share.

Please remember no foods containing nuts.

MOUNT CARMEL COLLEGE

Vacation Care Enrolment Form

Monday 15 April – Monday 29 April 2019

Child's Name: _____

Mother's Name: _____

Phone Work: _____

Phone Home: _____

Mobile: _____

Father's Name: _____

Phone Work: _____

Phone Home: _____

Mobile: _____

Address: _____

Emergency Contact Number (while child is in care) Name: _____

Phone No: _____ **Mobile:** _____

Family Doctor: _____ **Phone:** _____

1. I/We have read the attached holiday program and are aware of planned excursions on any day. I authorise my child/children to attend any excursions planned during the Vacation Care period and that excursion program details may change due to insufficient bookings or poor weather;
2. I/We understand the ratio for child care on excursions is 1 carer to every 10 children;
3. I/We consent for my child to travel on or in any form of public or private transport where such transport is deemed by the College to be necessary or desirable for the safe conduct of the excursion;
4. I/We consent for my child to participate in all activities and functions arranged as part of this excursion;
5. I/We consent for the College, by its servants or agents:

- To seek such medical or dental advice on behalf of my child as seen fit in the event of accident or illness, and;
- If, in the opinion of an attending medical or dental practitioner or medical officer (*'health practitioner'*) my child requires medical or dental attention or treatment (including but not limited to the administration of anaesthetic, blood transfusion or the performance of any surgical operation), to that *health practitioner* giving such attention or treatment;

provided that reasonable efforts are made to inform me of any serious injury or illness;

6. I/We certify that the consent which I have given in paragraph 4 is valid at all times while my child is in the custody of the College while attending or participating in the Vacation Care excursion;
7. I/We certify that I understand that the College will take reasonable care in the event of my child suffering accident or illness but that it will not be responsible for the costs of any medical or dental attention or treatment administered to my child in such event nor will it be directly responsible for any act or omission of any *health practitioner* attending or treating my child;
8. I/We agree that the College is not liable if any of my child's possessions or property is damaged, lost or stolen during this excursion;
9. I/We certify that in the event of my child being injured in any way in the course of this excursion, I will not in any way hold the College, or its agents, responsible unless such injury is caused by the wilful neglect or actionable negligence on the part of the College or its agents.
10. I/We certify that I have read the information supplied to me. My child agrees to abide by the conditions indicated.
11. I/We certify that if my child should exhibit behaviour that seriously endangers themselves or others or seriously interferes with others' enjoyment of the excursion, I will bear the full cost of return transport home/back to the College for my child and any adult supervisor that may be required to ensure the safety of my child during that transport as well as cancellation charges or similar incurred.
12. I/We agree for my child to undertake all activities and use all equipment and materials detailed, being aware of the hazards and risks that may be involved including but not limited to slips, trips, stumbles, falls, cuts, abrasions, lacerations, sprains, strains, fractures, burns, traffic and vehicular accidents, insect, animal and snake bites and drowning; and
13. I/We certify that it is my responsibility to provide updated medical information in writing to the College Office and/or the Child Care Supervisor in addition to any information provided below.

Signature: _____

Date: _____

Parent / Carer

Medical Information

Please provide details of any new or updated medical or health information for your child (i.e. information in addition/different to what is already held on College enrolled student records) and also provide this information in writing to the College Office.

Signed: _____ Date: _____

Name: _____



**Mount
Carmel
College**

We nurture.
We challenge.
We care.

Vacation Care Enrolment Form

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Name of Child/Children _____ Age _____

Age: _____

Age: _____

Please tick dates where you require care:

Monday 15 April <input type="checkbox"/>	Tuesday 16 April <input type="checkbox"/>	Wednesday 17 April <input type="checkbox"/>	Thursday 18 April <input type="checkbox"/>	Friday 19 April Public Holiday
Monday 22 April Public Holiday	Tuesday 23 April Public Holiday	Wednesday 24 April <input type="checkbox"/>	Thursday 25 April Public Holiday	Friday 26 April <input type="checkbox"/>
Monday 29 April <input type="checkbox"/>				

Please return this booking form to the College Office by Friday 29 March 2019.