

WHEELERS HILL PRIMARY SCHOOL OUT OF SCHOOL HOURS CARE

VACATION CARE PROGRAM April 2019

WHITES LANE, GLEN WAVERLEY 3150
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BOOKING PERIOD INFORMATION

PERMANENT WHEELERS HILL PRIMARY SCHOOL OSHC CHILDREN/FAMILIES

Monday 18th March 2019 FROM 7am

WHEELERS HILL PRIMARY SCHOOL CHILDREN/FAMILIES

Monday 25th March 2019 FROM 7am

There is a \$20 fee for children attending from other schools. This is paid once per program.

The closing date for bookings is Friday 29th March 6pm. Bookings made after this date will only be taken if there are places available.

Wheelers Hill Primary School Vacation Care Program offers a Quality Program for children to spend their holidays. Excursions and Activities are organised for each day by skilled and motivated Educators.

The Vacation Care Program is available to all children/families, not just those attending Wheelers Hill Primary School.

WHAT DOES MY CHILD NEED TO BRING?

Children must bring a nutritious lunch, drinks and several snacks each day. (Unless program specifies) The children are very active during the program and develop healthy appetites. Snacks are available for purchase. All food needing reheating or cooking **MUST** be given to staff on arrival for appropriate storage.

Children MUST bring a Sunsmart hat at all times. Children must wear appropriate clothing and footwear for activities.

There will be a cost of \$5.50 to purchase a Sunsmart hat for children who attend excursions without a hat.

Vacation Care Program April 2019

			Incursion: Oozey Slime Time			
	M	8 th	Be prepared to get messy with Supreme	\$70		
		April	Incursion's Slime Time.	Ψ/0		
		9 th	Incursion: Dance Fusion Australia	\$70		
	Т	<i>A</i> pril	Learn some new dance styles with Incursions R			
		•	US's Dance Fusion.			
		10 th	Excursion: Sky High			
		April	Try to find Wheelers Hill from Sky Sky's lookout,	.		
First	W	Arrival	walk through the gardens and make a wish at the	\$75		
Week		9:00am	wishing tree.			
			PLEASE ENSURE ARRIVAL BY 9AM			
		11 th	Excursion: Village Cinemas			
	Т	April	'The Lego Movie 2'	\$75		
	'	Arrival	Small popcorn and juice box provided	Ψ/3		
		9:00am	PLEASE ENSURE ARRIVAL BY 9AM			
		12 th	Incursion: I'm an OSHC Kid Get Me Outta Here!			
	F		Will you be able to complete our Ninja Warrior	\$70		
		April	obstacle course and challenges across the day?			
	M	15 th	Excursion: Village Cinemas			
		April	'Missing Link'	\$75		
		Arrival	Small popcorn and juice box provided			
		9:00am	PLEASE ENSURE ARRIVAL BY 9AM			
		4.2.th	Incursion: OSHC's Soccer Cup			
	Т	16 th	Kick and pass your way into Proactivity's soccer	\$70		
		April	sessions with your friends.			
			Inhouse: Easter Day			
,		17 th	Easter has come early to OSHC with variety of	*		
Second	W	April	craft and activities. And maybe there will be an	\$60		
Week		•	egg hunt too.			
			Excursion: Lilydale Lake			
	Т	18 th	Let's spend the day with Glen Waverley South			
		April	OSHC at Lilydale Lake, and enjoy a BBQ lunch with			
		Arrival	friends.	\$75		
		9:00am	Lunch will be provided.			
			PLEASE ENSURE ARRIVAL BY 9AM			
	F	19 th	Public Holiday: Good Friday			
	·	April	No Program Today.			
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WHEELERS HILL PRIMARY SCHOOL VACATION CARE Registration Form 8th April 2019 to 19th April 2019

Name of Child		Male/Female	Date of	Birth
Name of Child		Male/Female	Date of	Birth
Name of Child		Male/Female	Date of	Birth
School Child Attends				
Mother / Guardian Name				
Phone No (Home)	(Business)		(Mobile)	
Father / Guardian Name				
Phone No (Home)	(Business)		(Mobile)	
Are there any special custody arrang	gements? □ Yes ∣	□ No		
If Yes please give details IF A COURT ORDER EXISTS THIS			VIDED T	O THE COORDINATOR
Emergency Contact (other than pare	ent/guardian)			
Name	Phone			
Name	Phone			
Family Doctor	Phone N	lo		
Medicare Number	Do you sul	oscribe to an A	mbulance	Service? 🗆 Yes 🗆 No
Any relevant health problems? (Eg a	sthma, epilepsy)			
Is your child allergic to any of the f	ollowing? (Please o	circle) Penicillin	Beesting	gs Aspirin
Please indicate if your child has a di				
IF YES, PLEASE SPEAK TO THE CO MAKING A BOOKING.				ROCEDURES BEFORE
PLEASE ANSWER THE	FOLLOWIN	NG QUES	TION	<u>S</u>
Do we have your permission to assist Yes No PLEASE NOTIFY CO-ORDINATOR			·	
Do you give permission for photos of program during Vacation Care?	your child to be			

NOTICE TO PARENTS

- Hours of Operation 7am 6pm each day
- Late fees of \$1 per minute will be charged for all children at the program after 6pm. Program must be notified if you are aware that you will be late.
- The advertised program is flexible and may change due to unforseen circumstances.
- Buses for excursions will leave on time. Please arrive 15 minutes before departure time.
- The service reserves the right to suspend a child who continually exhibits unacceptable behaviour as per our "Termination of Enrolment" Policy.
- The Vacation Care program will not be responsible for loss or damage of expensive toys brought to the program

LEAVING AND COLLECTING CHILDREN

- Parents/guardians must sign children IN and OUT of the program each day.
- If any other person is to collect a child, the parent must inform the Co-ordinator in writing.
- In the event of an emergency-preventing pick-up by 6pm, the co-ordinator must be contacted on
- 0409 007 104. Penalty payments will still apply.

BOOKING PROCEDURES

- Complete the enrolment form attached. (Separate forms for each child)
- Completed forms <u>MUST</u> be given to the O.S.H.C. staff. Forms handed to school office will be returned to
 the family. Invoices will be sent/emailed out once the program starts with payments due by end of the
 program.
- Priority booking will initially be open to permanent families. Bookings for the School Community will open the following week.
- Bookings will not be accepted by phone; however, can be directly emailed to the OSHC program: wheelershilloshc@gmail.com
- Program places are limited to 50 children per day on excursion days.
- Bookings can be made during the program if vacancies exist.
- Refunds will not be available for cancellations, unless in the case of illness, upon receipt of a medical certificate.
- All enrolments will be accepted under Department of Family & Community Services priority of places outlined. For more details, please see the coordinator.

INFORMATION PRIVACY

All personal information collected by this service will remain confidential at all times and will only be used for program provision requirement.

BOOKING FORM

Please tick the days you wish to book.

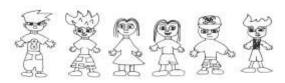
WEEK 1

Monday	8 th	Tuesday	9 th	Wednesday	10 th	Thursday	11 th	Friday	12 th
\$70		\$70		\$75		\$75		\$70	

WEEK 2

Monday	15 th	Tuesday	16 th	Wednesday	17 th	Thursday	18 th	Friday	19 th
\$75		\$70		\$60		\$75			

Child Care is needed for parent - Work/Training commitments \square or Recreation reasons \square



WHEELERS HILL PRIMARY SCHOOL OUT OF SCHOOL HOURS CARE

VACATION CARE EXCURSION PERMISSION SLIP

EXCURSION PERMISSION SLIP MUST BE RETURNED WITH BOOKING FOR CHILDREN TO ATTEND

All children require this form to attend any excursions and leave the premises to comply with legally binding regulations.

DATE	VENUE & ADDRESS	TIMES	STAFF/CHILD RATIO
10 th	Sky High – To explore the gardens and grounds	9am – 12:30pm	6/50max
April	26 Observatory Road, Mount Dandenong, V TRAVELLING BY SEAT BELTED BUS	ictoria, 3767	
11 th	Village Cinemas – to watch a movie	9am – 12:30pm	6/50max
April	435 Burwood Highway, Wantirna South 3152 TRAVELLING BY SEAT BELTED BUS	·	
15 th	Village Cinemas – to watch a movie	9am – 1pm	6/50max
April	435 Burwood Highway, Wantirna South 3152 TRAVELLING BY SEAT BELTED BUS	•	
18 th	Lilydale Lake – To meet another OSHC group	9am – 2:20pm	7/50max
April	435 Swansea Road, Lilydale Victoria 3140 TRAVELLING BY SEAT BELTED BUS		

Risk Assessments are available on request

I (the undersigned parent/guardian of the below named child/ren) agree to allow the below named child/ren to participate in the WHPS Vacation Care program & authorise the staff to take the above named child/ren on excursions. I agree to indemnify & keep indemnified & to hold Wheelers Hill Primary School, it's employees from & against all actions, costs, claims, whatsoever which the above named child/ren & I may have against them or any of them arising out of or in relation to the Vacation care Program, other than where negligence attaches to them. In the event of illness or injury to my child whilst attending the Vacation Care program; I authorise the Co-ordinator to consent, where the Co-ordinator is unable to contact me; to my child seeking such medical treatment as may be deemed necessary by a medical practitioner.

CHILD'S NAME		_ DATE
PARENT'S NAME	PARENT'S SIGNATURE	

##PLEASE NOTE DUE TO TIME RESTRAINTS IF YOU HAVENT ARRIVED BY THE ABOVE TIMES. THE SERVICE WILL ASSUME YOU'RE NON-ATTENDANCE AND THE EXCURSION WILL LEAVE ON TIME. THANKYOU FOR YOUR UNDERSTANDING.