

Mount Waverley North Primary School
Vacation Care Enrolment Form

1. Child's Name: _____ male/female
2. Child's Name: _____ male/female
3. Child's Name: _____ male/female

Birth date: 1. _____ 2. _____ 3. _____

Mother/Guardian's Name _____

Home address: _____

Phone Numbers: Home: _____ Work: _____

Mobile: _____

Hours of work: _____

Occupation: _____

Father/Guardian's Name _____

Home address: _____

Phone Numbers: Home: _____ Work: _____

Mobile: _____

Hours of work: _____

Occupation: _____

Person to contact in case of emergency other than parents:

1. _____ phone no: _____
2. _____ phone no: _____
3. _____ phone no: _____

Who has authority to collect your child from the program?

1. _____ 2. _____
3. _____ 4. _____

Are there any special arrangements regarding the custody of or access to the child/ren? _____

*** Copy of custodial arrangements must be attached

Does your child/ren have any special dietary requirements?

Is your child/ren taking any medications? Yes / No

Name of medication and dosage/time to be administered

Does the family have an ambulance subscription? _____

Name, Address and Phone No of child/ren's doctor: _____

Emergency Authorisation:

In absence of parent/s, I give permission for the Co-ordinator/staff of the Vacation Care Program to seek emergency/medical, hospital or ambulance service.

Signed: _____ Date: _____

The information given on this enrolment form is true and correct to the best of my knowledge.

Signed: _____ Date: _____

Vacation Care:

I agree to abide by the Mount Waverley North Primary School OSHC Policies and understand that:

2. Cancelled bookings **MUST** be accompanied by a **medical certificate** or full fees apply.
3. If I pick my child/ren up late from the program I will pay \$10 for every 5 minutes or part there of.
4. Emergency places may be available on the day but a position in the program cannot be guaranteed where advance booking are not made.
5. Due to Government funding policies, priority cannot be given to Mount Waverley North Primary School Students. All enrolments are processed in order of receipt.

Signed: _____ Date: _____