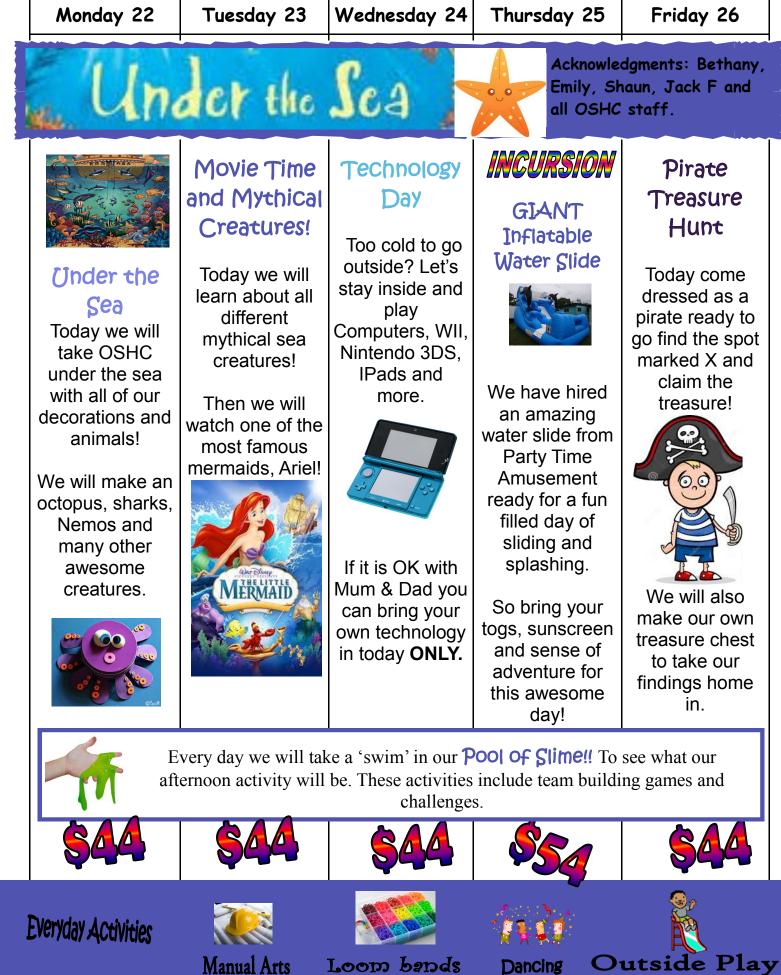
Spring Vacation Care Program 2014 Calvary Christian College on Carbrook Campus

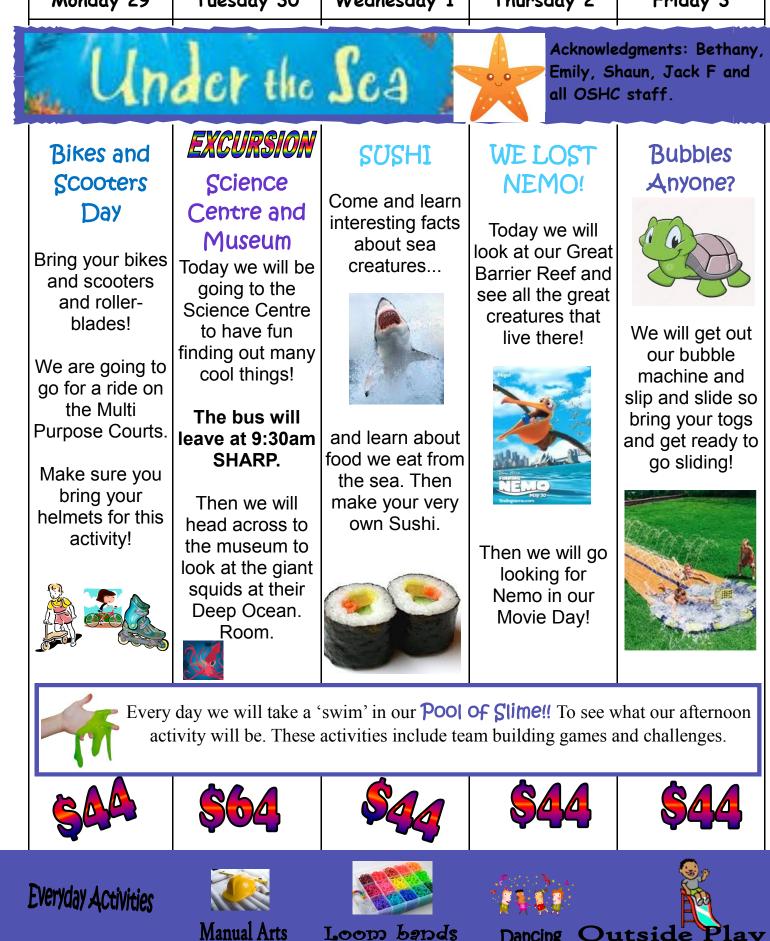




Operating Days and Times Monday—Friday 7:00am-6:00pm 22 Sept 2014—3 Oct 2014

What to Bring: Morning Tea, Lunch, Drink Bottle Covered Shoes...and....a smiling face!

Spring Vacation Care Program 2014 Calvary Christian College on Carbrook Campus Monday 29 Tuesday 30 Wednesday 1 Friday 3 Thursday 2



Operating Days and Times Monday-Friday 7:00am-6:00pm 22 Sept 2014-3 Oct 2014

What to Bring: Morning Tea, Lunch, Drink Bottle Covered Shoes...and....a smiling face!

Outside

Dancing

Calvary Christian College VACATION CARE ENROLMENT FORM PLEASE FILL OUT ALL SECTIONS AND SIGN BELOW

Calvary Ecanina in the Light of Christ

PRE-BOOKING IS ESSENTIAL AS PLACES ARE LIMITED.

All forms need to be handed in by 10 September for staffing purposes. After this time bookings will only be accepted if numbers allow.

Family Name:			
Name of Child/ren:			
Address:			
Date of Birth:			
Name of Parent/s or Guardians:			
Phone (H):			
Emergency Contact Name and Number:			
Allergies/Medication or special needs:			

Dates You Will Be Requiring Care: (please circle): 22 September—3 October 2014

September/October 2014

Week 1	Monday 22 Sept	Tuesday 23 Sept	Wednesday 24 Sept	Thursday 25 Sept	Friday 26 Sept
Week 2	Monday 29 Sept	Tuesday 30 Oct	Wednesday 1 Oct	Thursday 2 Oct	Friday 3 Oct

Vacation Care Fees 2014: \$44.00-(Regular Day) \$54.00-(Incursion) \$64.00-(Excursion)

The above information is collected for the primary purpose of assisting staff to fulfill their role of teaching, duty care and administration. Calvary Christian College abides by the National Privacy Act 2001. For further information please do not hesitate to contact the College Administration.

PLEASE NOTE: CHILDREN ARE NOT PERMITTED TO BRING BIKES, SCOOTERS, ROLLER BLADES, SKATEBOARDS ETC unless stated in the program... THERE IS NO HEATING OF FOOD IN THE MICROWAVE.

If you intend to send your child/ren on the excursion days, please complete the permission slip overleaf – **NO PERMISSION SLIP, NO EXCURSION/ACTIVITY.**

Remember: No Hat, No Outside Play and please provide sunscreen if your child is sunscreen sensitive.



28 August 2014

Dear Parents

Re: Giant Slide Incursion

On Thursday 25 September 2014, Vacation Care will be having an incursion with a Giant Inflatable Slide. Cost for this will be \$54.00 per student for the day.

If your child will be attending, please fill in the response below.

Date:	Thursday 25 September 2014	
Wear:	Socks, Joggers, Hat, shorts/pants (no dresses or skirts)	
Start Time:	The activity will be set up from 10am –3pm	

Yours in Christ

Moira Dixon Coordinator Vacation Care

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I give permission for my child/ren		_ to participate in the Vacation Care incusrion with the Giant
Slide on Thursday 25th September 2014.		
Name:	Phone:	
Parent/Guardian's Signature	Date	
Please note any medical details:		

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28 August 2014

Dear Parents

Re: Science Centre and Museum

On Tuesday 30 September, Vacation Care will be having an excursion to The Science Center and Queensland Museum. Cost for this will be \$64.00 per student for the day.

If your child will be attending, please fill in the response below.

Venue:	Science Centre and Museum Grey and Melbourne Streets Brisbane City	
Date:	Tuesday 30 September	
Wear:	Socks, Joggers, Hat, comfortable clothing	
Bring:	Packed disposable lunch	
Start Time:	The bus will leave at 9:30am SHARP from Carbrook.	
Arrive Back at school:	The bus will return to school by 3:00pm.	

Yours in Christ

Moira Dixon Coordinator Vacation Care

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I give permission for my child/ren	to participate in the Vacation Care excursion The Science
Centre and Queensland Museum on Tuesday 30 September 201	4.

Name:	Phone:	
Parent/Guardian's Signature	Date	
Please note any medical details:		

MEDICAL ISSUE

My child		has	
	Child's full name	Medical issue	
I have filled	out the relevant medical fo	rms with their medication.	
Parent/Gua	ardian Signature	Contact number	Date
DIETARY NE	EDS		
My child	Child's full name	has Dietary need	
Please list any	ything your child cannot eat		
Parent/Gu	ardian Signature	Contact number	Date

JUNIOR OVAL AND COLLEGE GROUNDS PERMISSION

On some days across Vacation Care we will be going to the College buildings and grounds for some of the activities as a whole group. Due to these areas being outside our licensed areas we will require your permission for an on campus excursion. Please sign the slip below and return with **all** the Vacation Care Enrolment Forms.

Junior Oval and College Buildings Excursion

I give permission for my child/ren______ to attend any programed activity held at the College buildings and grounds from Monday 22 September 2014 to Friday 3rd October 2014.

Parent/Guardian Signature

22 August 2014



Dear Parents

Springwood Vacation Care Children Only

If your child/ren will be attending the Calvary Christian College Vacation Care Program during the September/ October holiday period you will need to complete this form if you intend using the bus service.

Please be aware of the following:

- Springwood OSHC will open each morning between 7:00am 9:00am to receive children attending the Vacation Care.
- At 9:00am all students will be transported by a Calvary bus driver to the Carbrook Campus.
- Vacation Care bookings need to be made in advance so that we know which size bus to send and if the service is required.
- There is no additional cost for this service.
- There is no return bus service; parents will need to collect their children from the Carbrook Campus each afternoon.

Please complete the permission form and return with the rest of the Vacation Care booking forms.

Yours in Christ

Ronwyn Collier OSHC Coordinator

Permission Form for Vacation Care Bus Service Monday 22 September 2014—Friday 3rd October 2014

I give permission for my child		to travel by bus to the Carbrook
Campus during the September/O	ctober Vacation Care period.	
Medical conditions we should be	aware of	
Best contact number		
Signed:	Name (please print):	

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