Vacation Care Excursion Authorisation Form

Centre: Mowbray

Child 1 Full Name:_____DOB: _____

Child 2 Full Name:_____DOB: _____

Child 3 Full Name:_____DOB: _____

Address:_____

Email Address: _____

Phone Number:

Parent 1:_____Parent 2: _____

Excursion to:	Hoyts Chatswood		
Address:	1 Anderson Street, Chatswood		
Description of excursion destination:	Children will enter and make their way to the cinemas and wait in the foyer until they can enter the cinema. Foyer is a wide-open space where children will be directed to sit and wait with educators.		
Proposed activities:	Children will watch a movie		
Excursion Date:	Tuesday April 17th, 2018		
Leave Centre at:	9:00am sharp	**Return by:**	1:00pm
Method of transport:	HIRED COACH		

Anticipated number of children attending:	32
Anticipated ratio of educators to anticipated number of children attending:	1:8
Anticipated No. of staff and other adults who will accompany and supervise the children:	4

I, (name)_____being a parent / guardian give permission for (children's full name) _____ to attend the above excursion as detailed. I am aware that a risk assessment has been prepared for this excursion and is accessible at the Vacation Care Service

Signature:_____

Name:_____

Date: _____

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Child 1 Full Name:_____DOB: _____

Child 2 Full Name:_____DOB: _____

Child 3 Full Name:_____DOB: _____

Address:_____

Email Address: _____

Phone Number:

Parent 1:_____Parent 2: _____

Excursion to:	Strike Bowling Macquarie		
Address:	Waterloo Road and Herring Road, North Ryde		
Description of excursion destination:	Children will exit the bus and make their way into the venue where they will be directed by venue staff as to where to store bags. Children will then participate in proposed activities.		
Proposed activities:	Bowling, arcade games and Laser Tag		
Excursion Date:	Friday April 20th, 2018		
Leave Centre at:	10:00am	**Return by:**	1:30pm
Method of transport:	HIRED COACH		

Anticipated number of children attending:	32
Anticipated ratio of educators to anticipated number of children attending:	1:8
Anticipated No. of staff and other adults who will accompany and supervise the children:	4

I, (name)_____being a parent / guardian give permission for (children's full name) _____ to attend the above excursion as detailed. I am aware that a risk assessment has been prepared for this excursion and is accessible at the Vacation Care Service

Signature:_____

Name:_____

Date: _____

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Centre: Mowbray

Child 1 Full Name:_____DOB: _____

Child 2 Full Name:_____DOB: _____

Child 3 Full Name:_____DOB: _____

Address:_____

Email Address: _____

Phone Number:

Parent 1:_____Parent 2: _____

Excursion to:	Our Big Kitchen		
Address:	36 Flood Street, Bondi		
Description of excursion destination:	Children have a fun, inspiring and meaningful day learning about cooking, healthy eating and the importance of helping those less fortunate than themselves.		
Proposed activities:	Children will make bread rolls, cookies, other foods, and other activities.		
Excursion Date:	Thursday April 26th, 2018		
Leave Centre at:	9:30am	**Return by:**	1:00pm
Method of transport:	HIRED COACH		
Anticipated number of children attending:			32
Anticipated ratio of educators to anticipated number of children attending:			1:8
Anticipated No. of staff and other adults who will accompany and supervise the children:			4

I, (name)_____being a parent / guardian give permission for (children's full name) _____ to attend the above excursion as detailed. I am aware that a risk assessment has been prepared for this excursion and is accessible at the Vacation Care Service

Signature:_____

Name:_____

Date: _____