Welcome to St Matthew's Vacation Care

Program Highlights

**Week 1**
- **Making Wearable Art "Reverse Garbage Workshop"**
- **Master Chef** competition create, cook and serve competition
- **"Life Be In it Workshop"** Prep - Y2 - fun games
- **Time zone Excursion- Y3-Y6 - children, be at the service by 9am limited places book early
- **AFL & Touch Footy**

**Week 2**
- **Beat Bus Workshop-** interactive musical workshop that encourages children of all ages to make music with various instruments. Highly recommended.
- **Putt Putt Excursion Prep to Y6 - be at service by 9am**
- **Join our Mad Hatters tea party and eat some cake.**
- **Ms Kandinsky Interactive Art Show** encouraging children about their creativity and how to express it. **A must see!!**
- **Treasure Hunters-** make a map and go on a treasure hunt.

**What you need to bring**
- Your smiles, hats, sunscreen & joggers
  (Shoes must be in their bags if children are not wearing them)
- **M/tea. Lunch & Drinks-** parents please make sure your children have enough food in there lunch boxes. (breakfast/afternoon tea is provided)
- Please send children with meals that don’t need heating or reheating or foods in tins that have sharp edges when opened. Please encourage your children not to bring their personal toys as they may be broken or lost. We provide plenty for the children to do.

**Costs**
- **$42 per day per child (6.30am-6.00pm) Casual $44.00 per day (booked on the day)** If your are claiming CCB or CCR we must have your CRN and your children’s CRN

**CCB (family income assessed for eligibility) & CCR 50% off fees if eligible**

**Benefits** Apply to daily fees, workshops and excursions (Limited Places book early).

**Absences**
A full day Absent fee and additional planned costs are charged if the required cancellation notice is not given—1 full weeks notice.
EASTER VACATION CARE 2016
BOOKING FORM

PARENT/CARER NAME

<table>
<thead>
<tr>
<th>Address of Primary Account Holder</th>
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<tbody>
<tr>
<td>Phone Number</td>
<td>Work Number</td>
</tr>
<tr>
<td>Mobile number</td>
<td></td>
</tr>
<tr>
<td>Email Address</td>
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The following people are NOT authorised to collect my child/ren

Does your child/ren have any allergies/illnesses? Please list

PARENT/CARER AGREEMENT

- I/We acknowledge that my child/ren are currently enrolled and have completed Centacare Child Care Services enrolment forms at ________________. This information will be made available if your child/ren is/are attending another Centacare Child Care Service.
- I/We acknowledge that as per the cancellation policy stated in my enrolment package, any days that are booked will be paid for. Full fees will be charged for all absences and I/we understand that it is my/our responsibility to notify in writing, of any changes to booking details.
- I/We acknowledge that vacation care bookings may be in jeopardy unless accounts are paid up to date and vacation care fees are paid in advance at the commencement of booking at the Vacation Care Program.
- I/We agree to pay the schedule fees for the bookings nominated above as per the OSHC Booking and Payment Policy.
- I/We understand that this booking form is due back by the COB 18/03/16 or my bookings will be charged at a casual rate.

BOOKING REQUIRED (Please tick)

<table>
<thead>
<tr>
<th>MON</th>
<th>TUE</th>
<th>WED</th>
<th>THU</th>
<th>FRI</th>
<th>SAT</th>
<th>SUN</th>
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</thead>
<tbody>
<tr>
<td>INCUSION</td>
<td>EXCUSION</td>
<td>NORMAL IN HOUSE</td>
<td>DAY</td>
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Please note dates of INCUSIONS and EXCURSIONS. Additional costs are as outlined on the Easter Vacation Care Program.

EXCURSION PERMISSION FORMS will need to be completed for your child/ren to attend.

Parent/Carer 1 Signature: __________________________

Date: _____/_____/______

Parent/Carer 2 Signature: __________________________

Date: _____/_____/______

OFFICE USE ONLY: Date Received: __________________________

Received By: __________________________

Account Paid: Term Yes / No, Vac Care Yes / No, Casual Rate Yes / No

Entered By: __________________________