

ST MARTIN'S GREENACRES OSHC

VACATION CARE BOOKING FORM

EXCURSION
FULL FEE
(Before CCS Rebate)
\$80.00

INCURSION
FULL FEE
(Before CCS Rebate)
\$65.00

HOME DAY
FULL FEE
(Before CCS Rebate)
\$65.00



Account Holder: _____ Priority of Access: _____

Child Name: _____ Year level: _____

Child Name: _____ Year level: _____

Child Name: _____ Year level: _____

BOOKING TIMEFRAMES:

Priority Access 1 + 2 bookings will begin to be processed from Tuesday 10th of June.

Priority Access 3 + 4 bookings will be processed from Monday 16th June.

Priority Access bookings submitted past Monday 23rd June will be processed on a first come, first serve basis. All booking amendments must be communicated by no later than Monday 30th June @ 7:00am.

All booking cancellations after this time will be subject to the cancellation policy.

ALL OUTSTANDING FEES MUST BE PAID PRIOR TO SUBMISSION OF THIS FORM

Please tick or write the name of your child in the blank boxes below to mark your requested bookings.
WEEK 1 PROGRAM (7TH - 11TH JULY 2025)

Monday 7th July: Coles Health Kicks	Tuesday 8th July: Rocking Horse/Zoo	Wednesday 9th July: Nature Play	Thursday 10th July: Lilo & Stitch	Friday 11th July: PJs & Camping

WEEK 2 PROGRAM (14TH - 18TH JULY 2025)

Monday 14th July: Shark Tank	Tuesday 15th July: A-Mazing Race (Botanic Gardens)	Wednesday 16th July: Ignite VR	Thursday 17th July: Sportzworkx/ Roller Skating	Friday 18th July: Artists Day

PERMISSIONS:

Parent Signature below: _____

I grant permission for my child(ren), named on this booking form, to attend and participate in all programmed excursion activities.

I grant permission for my child(ren), named on this booking form, to watch PG-rated movies for the duration of April Vacation Care including *Lilo & Stitch* with Palace Nove if cinema excursion is booked..

I grant permission for my child(ren), named on this booking form, to engage in water-based activities for the sensory play (R-2) incursion with Nature Play SA and acknowledge that it is my responsibility to pack spare clothes for my child(ren).

I acknowledge that I am liable for any damage to personal technology brought to OSHC on Wednesday 16th of July for the BYO tech day

DECLARATION:

- I have read and understand all provided details for the Information Pamphlet, Itinerary, and Excursion Details.
- I am aware of my responsibilities to support my child(ren)'s attendance, and give permission for my child(ren), as named on the booking form, to participate in all requested dates.
- I have read and agree to abide by the St Martin's OSHC's policies, in conjunction with the Information Pamphlet.
- I acknowledge that if my child has a medical condition, their medication and documentation must be up-to-date by Friday 4th July and abide by the service policies for my child to be able to attend Vacation Care.

Full Name: _____	Signature: _____	Date: _____
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