

Genesis Energy Recreation Centre Enrolment and Consent Form



First Childs Name: _____

Last Name: _____

Age: _____

DOB: _____

School attending: _____

**Any special considerations required
(e.g. Medication, allergies)**

YES/NO

Please specify

ADDITIONAL CHILDREN:

Second Childs name: _____

Last Name: _____

Age: _____

DOB: _____

School attending: _____

**Any special considerations required
(e.g. Medication, allergies)**

YES/NO

Please specify

ADDITIONAL CHILDREN:

Third Childs name: _____

Last Name: _____

Age: _____

DOB: _____

School attending: _____

**Any special considerations required
(e.g. Medication, allergies)**

YES/NO

Please specify



(Please sign in Signed places)

I/We give permission for my child/ren (name at top) to participate in the children's programme at the Genesis Energy Recreation Centre.

I give permission for my child to be taken to and from the centre, in order to take part in activities organized by the staff of the centre.

Should an emergency care be needed for my child/ren I/we give permission for the supervisor to seek medical treatment at my own cost. While all care is taken by the staff and Management, I/we acknowledge however, in signing this form, that neither staff nor management of the programme will be liable for any loss or damage arising out of attendance at the programme.

Name:

Date:

Signed:

Photos and Image – I agree that my child/ren may be photographed, or have child's image recorded in any way in connection with the programmes ran at the Genesis Energy Recreation Centre, I agree to the Genesis Energy Recreation Centre using any such imagery in connection with the promotion and reporting of the programmes my child/ren attends. I understand I am entitled to request access to such images and to have copies of them at my/our own cost.

Name:

Date:

Signed:

Privacy – In completing a Genesis Energy Recreation Centre enrolment form, I am providing Genesis Energy Recreation Centre with personal information. I understand this information will be collected and held by the Genesis Energy Recreation Centre and used by any sponsors, employees, contractors and agents associated with the programmes my child/ren is involved in for the purposes of:- administrating your enrolment into the different programmes involved, disclosing relevant information to medical and related personnel in the programmes, promoting the programmes and other programmes held by Genesis Energy Recreation Centre, website, mail-out or other communication relating to the programme, If my child breaks anything during the programme I am liable for any damages or costs

Name:

Date:

Signed:

Genesis Energy Recreation Reenrolment form

Please mark dates your child will be attending each program

Child first name _____

Child last name _____

Term	Mon	Tue	Wed	Thu	Fri
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HP

Week 1	18 July	19 July	20 July	21 July	22 July
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Week 2	25 July	26 July	27 July	28 July	29 July
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ASC/BSC					
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Week 1	1 Aug	2 Aug	3 Aug	4 Aug	5 Aug
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Week 2	8 Aug	9 Aug	10 Aug	11 Aug	12 Aug
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Week 3	15 Aug	16 Aug	17 Aug	18 Aug	19 Aug
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Week 4	22 Aug	23 Aug	24 Aug	25 Aug	26 Aug
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Week 5	29 Aug	20 Aug	31 Aug	1 Sep	2 Sep
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Week 6	5 Sep	6 Sep	7 Sep	8 Sep	9 Sep
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Week 7	12 Sep	13 Sep	14 Sep	15 Sep	16 Sep
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Week 8	19 Sep	20 Sep	21 Sep	22 Sep	23 Sep
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Week 9	26 Sep	27 Sep	28 Sep	29 Sep	30 Sep
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Week 10	3 Oct	4 Oct	5 Oct	6 Oct	7 Oct
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How will you be paying? Tick

Work and Income	
Pay each class, each day	
Weekly, Fortnightly, Monthly	

- **Cancellations**

Cancellations need to be made 24 hours in advance of the day of the cancellation for Holiday Programme or 1 week in advance for After/Before School Care for all paying patrons, if they are made after the stated requirements you will be charged for the day as **NO CONTACT FEE (Full Charge)**. Cancellations can be made by ringing the Genesis Energy Recreation Centre reception or the Programme cell phone on 0274275691