



HOLIDAY PROGRAMME Sept 27-Oct1 & 4-8

CHILDS DETAILS

Child's name _____ Age _____ DOB ___/___/___ M or F

Medical Conditions _____

Childs Address _____

Suburb _____ Home Ph _____

2nd Child's name _____ Age _____ DOB ___/___/___ M or F

3rd Child's name _____ Age _____ DOB ___/___/___ M or F

PARENT/CAREGIVER'S DETAILS

Parent/Caregivers Name _____

Home Phone _____ Work Ph _____

Mobile _____ Email _____ Would you like to recieve emails

ALTERNATIVE EMERGENCY DETAILS

Name _____ Ph _____

Relationship to Child _____

Mobile _____ Email _____

OTHER PERSONS AUTHORISED TO PICK UP YOUR CHILD

Name 1 _____

Name 2 _____

How did you hear about the programme? _____

I HEREBY ACKNOWLEDGE AND AGREE

I will supply my child with lunch, drink and sunhat everyday that they attend the programme – please do not allow children to bring lollies/sweets along * I give permission for my child to be transported* I will sign my child into the holiday programme upon arrival and out again when I collect my child* That I will advise **SwimMagic** in writing if my child is to be collected by any other person than those detailed on the enrolment form * We have a NO REFUND policy * I understand that there are risks associated with my child/ren attending the holiday programme. To help minimise these risks, the programme has safety procedures, as well as rules and boundaries for all children that must be complied with * **SwimMagic** is not responsible for loss and damage to children's possessions. If you need to drop your child off earlier than 8.30/ Pick up later than 5.30pm there will be a fee of \$10.00 which will need to be paid on the day.

Parent/Caregiver _____ Sign _____