

CONFIDENTIAL:

The Rainbow Activity Centre Randwick (TRAC)
90 Rainbow Street, Randwick NSW 2031
Centre: 9398 7330
Contact: Tanya Buick 0423 178 180
EMAIL: tracwork@iprimus.com.au

VACATION CARE - SEPT - OCT 2013
ENROLMENT FORM

DUE BACK NO LATER THAN FRIDAY, 13TH SEPTEMBER PLEASE

CHILD/RENS DETAILS:

1. Name:.....DOB.....M/F.....
2. Name:.....DOB.....M/F.....
3. Name:.....DOB:.....M/F.....

Who does your child live with?.....

PARENTS:

Mother's Name:..... Father's Name:.....

Address:..... Address:.....

.....

Occupation:..... Occupation:.....

Phone (H):..... Phone (H):.....

Phone (W):..... Phone (W):.....

Mobile:..... Mobile:.....

Email:..... Email:.....

Country of birth:..... Country of birth:.....

Are there any court orders that need to be observed in relation to your child?

EMERGENCY CONTACT: (in the event that neither parent can be reached).

Name:.....Relationship:.....

Address:.....

Phone Number:.....Mobile.....

MEDICAL:

Does your child have any allergies/conditions:.....

Does your child have any additional/special needs:.....

Is your child on any regular medication:.....

Which days is your child going to attend: **PLEASE TICK THE DAYS YOU WISH TO BOOK AND SIGN YOUR CONSENT TO ATTEND EXCURSIONS AT THE BOTTOM OF THE PAGE.**

Monday 23RD SPRING HAS SPRUNG AT TRAC	Tuesday 24TH **EXCURSION** MOVIES	Wednesday 25TH RECYCLE REUSE REDUCE AT TRAC	Thursday 26TH **EXCURSION** FLIP OUT TRAMPOLINE ARENA	Friday 27TH FABULOUS FUN DAY AT TRAC
Monday 30TH MAGIC MONDAY AT TRAC	Tuesday 1ST FITNESS FRENZY AT TRAC	Wednesday 2ND ** SWIMMING EXCURSION** COOK & PHILIP	Thursday 3RD PORTRAIT PERFECTION AT TRAC	Friday 4TH **EXCURSION** TIC TOKS
Monday 7TH PUBLIC HOLIDAY	Tuesday 8TH BACK TO SCHOOL FOR STUDENTS!			

Please TICK and sign your permission for the following:

To attend excursions on the dates booked as indicated above

To attend supervised excursions to Payne Reserve (next to TRAC)

To being photographed during excursions and activities to display at TRAC

To being photographed during excursions and activities to display ***ON TRAC'S WEBSITE***

The staff to administer PANADOL in the event that they have contacted me for permission via telephone. I will sign the medication book when I collect my child/ren that day.

In the event of emergency medical treatment other than First Aid, I give permission for staff to call an ambulance.

For my child to go on short outings within 2km of the centre.

From time to time and particularly in wet weather we will play a movie. We usually try to keep this to 'G' rated, however, from time to time this maybe a 'PG' movie. Do you give permission for your child to watch an appropriate 'PG' movie

SIGNATURE: _____ NAME: _____

WHO CAN COLLECT YOUR CHILD/REN FROM THE CENTRE: (Nominated person)

1 Ph:

2.....Ph:.....

3.....Ph:.....

Please advise centre staff either by email/phone/written note in the event of anyone other than a parent or nominated person is collecting your child. We will **NOT** release a child/ren unless we have your permission.

Vacation Care Fees:

\$45.00 per child per day (less CCB% & CCTR) for bookings received by **13TH SEPTEMBER 2013.**

PLEASE NOTE THAT BOOKINGS WILL NO LONGER BE ACCEPTED AFTER THE DUE DATE!!

Fee payable includes excursions (conditions apply). Fees are due on the first day of attendance. Bookings are non-refundable, however, they are transferable in the same holiday period depending on availability and staff ratios.

PLEASE

Ensure that all Before and After School Care fee's are settled by **FRIDAY, 13TH SEPTEMBER 2013.** We cannot confirm any booking for Vacation Care until your account is finalised for the term.

CHILD CARE BENEFIT/CHILD CARE TAX REBATE:

Please provide the following information if you are registered to receive Child Care Benefit and the Child Care Tax Rebate.

If you are not registered, please call The Family Assistance Office on 13 61 50 to enquire about your eligibility and registration.

Please complete the following statement that applies to you:

€ I wish to claim Child Care Benefit as a fee reduction. This means that I will receive my child care benefit entitlement through reduced fees and the 50% child care tax rebate as I have elected with The Family Assistance Office.

Our family CRN is:.....CRN holders date of birth is:.....

My Child's CRN is:.....

€ I wish to claim the Child Care Benefit as a lump sum payment at the end of the financial year. This means that I will pay full fees and any entitlement to Child Care Benefit and the Tax Rebate will be refunded to me at the end of the financial year by The Family Assistance Office. (You still need to supply the CRN numbers as requested above).

Do you have any other children presently enrolled in Child Care? Yes/No How many?.....

PRIORITY: This information is required to ensure every family is allocated an appropriate priority listing for access to our service.

Are you a sole parent/carer and are you working/training or studying?	Y/N
Are you a family with both parents/carers and are both parents/carers working/training or studying?	Y/N
Is your income threshold lower than \$37,960.00 for 2009-2010?	Y/N
Are either parents/carers on an income support?	Y/N
Does your family include a person with a disability?	Y/N
Are you socially isolated?	Y/N

CULTURAL/ETHNIC BACKGROUND: (Statistical purposes only)

Is your child an Aboriginal or Torres Strait Islander: Y/N (please circle)

What other language does your child/rens family speak at home:.....

Are there any foods that your child may NOT have due to cultural beliefs:.....

Are there any customs or festivals that you do not wish your child to participate in?.....

PLEASE NOTE:

- Please keep a copy of the program and what to bring handy at home to ensure you know what your child needs to bring each day AND what time we will be leaving on excursion. Excursions leave at the departure time and are not delayed.
- Please remember to call Tanya on 0423 178 180 if your child cannot attend the days booked.
- Please ensure that you pack enough food as requested. A charge of \$5 will be added to your account if we have to supply your child with lunch/drinks etc!
- Ensure that your child brings a hat and change of clothing each day.
- For safety reasons your child should wear enclosed shoes each day. No thongs or sandals!
- Please pick your child/ren up by 6.00pm each day as late fees do apply. \$15 for pick ups between 6.00pm - 6.15pm, and \$30 for pick ups between 6.16pm and 6.30pm.

- An annual registration fee of \$50 applies for all families wishing to enrol at the centre. Registration covers enrolments and service usage from 1st January to the 31st December each year.

THANK YOU FOR YOUR ENROLMENT AT THE RAINBOW ACTIVITY CENTRE.

Please assist us by asking your child/ren these questions and dropping the form into TRAC or the school office with your enrolment form. This assists us tremendously with being able to ensure that we program with all children's interests and preferences in mind.

We also encourage parent's to provide us with information that could assist with planning and programming and to be actively involved with the service.

What name does your child prefer to be called?	Answers:
What would your child like to eat for afternoon tea? Please list a few of food items that are healthy and your child enjoys. Recipes are welcome!	
Please ask your child/ren what they would like to do in the school holidays, i.e. excursions, themes for a day, craft etc	
What are your child's special interests at this time? i.e. sports, games, activities they like to do	
We would like to encourage parent's to assist with ideas, policy reviews, working bees and volunteer assistance during the school holidays. Can you assist with any of the above? How you would like to be involved?	
Have you received and read a copy of the Parent Handbook?	