

Welcome to Connells Point Vacation Care for December 2022 and January 2023.

Our program and planning are completed in accordance with the National Quality Standards and the My Time Our Place Learning Framework.

All children must be registered with the centre for 2023 with the registration & bond fees paid.

Payment for Vacation Care are required BY the closing date, or your placement will not be guaranteed

Booking requests **must be** made through the Xplor app Wednesday 7th December

Any bookings received after this closing date will be placed on a waitlist and will not be guaranteed a placement on the day(s) requested

Families will receive a booking confirmation through the app once we have received full payment for Vacation Care, signed excursion permission forms and waivers.

Priority is given to families that use the centre during term time – other bookings will be processed after the closing date

All accounts need to have a NIL balance before you book your child/ren into Vacation Care

Important Reminders

Food & Drinks	Clothing & Equipment	Please Do	Please Do Not
<ul style="list-style-type: none">• Bring a refillable drink bottle each day.• Pack snacks, morning tea & lunch unless specified on the program.• No foods requiring warming up are to be brought into the centre (including noodles)	<ul style="list-style-type: none">• Children MUST wear comfortable ENCLOSED shoes (no thongs, slides or crocs)• All children MUST BRING a drink bottle, hat & sunscreen each day.• Children should wear suitable clothing for the day's events. Please provide a towel for your child each day.• Excursions that involve water children will need to wear swimsuit, bring a towel & a change of clothes etc.	<ul style="list-style-type: none">• Provide ALL medical equipment (e.g., Epi pens / medication) and ALL illness or allergy action plans PRIOR to vacation care.• Sign children IN and OUT of each session by a parent, guardian or person placed as emergency contact on booking form.• Our transport runs on a tight schedule on excursion days, so please ensure you are at the centre by the time listed on the program.• Notify BASC regarding any absences during vacation care.• Bring a change of clothes in case of water play.	<ul style="list-style-type: none">• Children are not to bring spending money on excursions.• Electronics are permitted but not on excursions. The children are responsible for their own devices.

Excursion Permissions – must be completed before the commencement of vacation care.

A Risk Assessment has been conducted for each of these trips and is available for you to view at the centre.

Please be aware that it is predicted to be a very wet summer and as such some days may have to change based on the weather

Wednesday 21st December 2022

Sausage sizzle and play at Donnelly Park

Leaving the centre for approx. 4 hours between 9:30am and 1:30pm

We will take a short walk to Donnelly Park have a play and enjoy a sausage sizzle

Maximum 40 children and 5 Educators (1:8 ratio)

I give permission for _____ to leave the centre for the above excursion.

Parent/guardian name _____ Signature _____ Date _____

Please read, tick and sign below:

- I understand that the educator child ratios will be maintained at a minimum of 1:15 for centre and 1:8 excursion days
- I understand that an excursion risk assessment has been completed prior to the event and is available upon request.
- I agree to abide by the policies and procedures of Connells Point Before and After School Care Centre Inc. and agree to notify staff if my child will be absent for a booked day of vacation care.
- I understand that any cancellations to vacation care days will not be refunded after the closing date.
- I understand that all excursions run on a tight schedule and Connells Point Vacation Care will leave at the designated time and will not wait.
- I understand that Connells Point Vacation Care follows their behaviour management guide, and all staff will always actively supervise the children.
- I understand that payment for Vacation Care must be made by the closing date. If payment has not been made, I will be subject to losing a spot-on day requested.
- I understand that an annual enrolment form and registration fee must be paid before placement is guaranteed.

Parent/guardian name _____ Signature _____ Date _____

Monday 9th January 2023

Circus Kidz

Fun Day In

Circus Workshop will be taking place at the centre

Below is the Student Registration Waiver Form that the parents will need to sign before the workshop:

<https://form.jotform.com/222982697925878>

Tuesday 10th January 2023

Ice Zoo Alexandria

Leaving centre for approx. 3 hours between 9:15am and 12:15pm

We will be taking a private bus to Ice Zoo Alexandria

We will use the same route in reverse for the return trip back to the centre.

Maximum 40 children and 5 Educators (1:8 ratio)

Below is the Ice Zoo waiver that parents must complete prior to the excursion:

<https://icezoo.com/vacation-care-waiver/>

My child/children require a training penguin

- Yes – please write names of children requiring penguins _____
- No

Please also write your child's/children's name and shoe sizes below to assist with getting children fitted quickly to maximise skating time:

I give permission for _____ to leave the centre for the above excursion.

Parent/guardian name _____ Signature _____ Date _____

Please read, tick and sign below:

- I understand that the educator child ratios will be maintained at a minimum of 1:15 for centre and 1:8 excursion days
- I understand that an excursion risk assessment has been completed prior to the event and is available upon request.
- I agree to abide by the policies and procedures of Connells Point Before and After School Care Centre Inc. and agree to notify staff if my child will be absent for a booked day of vacation care.
- I understand that any cancellations to vacation care days will not be refunded after the closing date.
- I understand that all excursions run on a tight schedule and Connells Point Vacation Care will leave at the designated time and will not wait.
- I understand that Connells Point Vacation Care follows their behaviour management guide, and all staff will always actively supervise the children.
- I understand that payment for Vacation Care must be made by the closing date. If payment has not been made, I will be subject to losing a spot-on day requested.
- I understand that an annual enrolment form and registration fee must be paid before placement is guaranteed.

Parent/guardian name _____ Signature _____ Date _____

Thursday 12th January 2023

Leaving centre for approx. 5 hours between 9:30am and 2.30pm.

We will be taking a private bus to Symbio Wildlife Park in Helensburgh Maximum 40 children and 5 Educators (1:8 ratio). Children will be in water so will need to have their swimming costumes, towels and a change of clothes.

I give permission for _____ to leave the centre for the above excursion.

Parent/guardian name _____ Signature _____ Date _____

Please read, tick and sign below:

- I understand that the educator child ratios will be maintained at a minimum of 1:15 for centre and 1:8 excursion days
- I understand that an excursion risk assessment has been completed prior to the event and is available upon request.
- I agree to abide by the policies and procedures of Connells Point Before and After School Care Centre Inc. and agree to notify staff if my child will be absent for a booked day of vacation care.
- I understand that any cancellations to vacation care days will not be refunded after the closing date.
- I understand that all excursions run on a tight schedule and Connells Point Vacation Care will leave at the designated time and will not wait.
- I understand that Connells Point Vacation Care follows their behaviour management guide, and all staff will always actively supervise the children.
- I understand that payment for Vacation Care must be made by the closing date. If payment has not been made, I will be subject to losing a spot-on day requested.
- I understand that an annual enrolment form and registration fee must be paid before placement is guaranteed.

Parent/guardian name _____ Signature _____ Date _____

Monday 16th January 2023

Event's Cinema

Leaving the centre for approx. 4 hours between 10:00am and 2:00pm we will take a public bus 953 to Hurstville the children will watch a G or PG movie and return back to the centre via public bus 953
Maximum 40 children and 3 Educators (1:15 ratio)

I give permission for _____ to leave the centre for the above excursion.

Parent/guardian name _____ Signature _____ Date _____

Please read, tick and sign below:

- I understand that the educator child ratios will be maintained at a minimum of 1:15 for centre and 1:8 excursion days
- I understand that an excursion risk assessment has been completed prior to the event and is available upon request.
- I agree to abide by the policies and procedures of Connells Point Before and After School Care Centre Inc. and agree to notify staff if my child will be absent for a booked day of vacation care.
- I understand that any cancellations to vacation care days will not be refunded after the closing date.
- I understand that all excursions run on a tight schedule and Connells Point Vacation Care will leave at the designated time and will not wait.
- I understand that Connells Point Vacation Care follows their behaviour management guide, and all staff will always actively supervise the children.
- I understand that payment for Vacation Care must be made by the closing date. If payment has not been made, I will be subject to losing a spot-on day requested.
- I understand that an annual enrolment form and registration fee must be paid before placement is guaranteed.

Parent/guardian name _____ Signature _____ Date _____

Wednesday 18th January 2023

Play Cave Miranda

Leaving the centre for approx. 4 hours between 9:30am and 1:30pm we will take a private bus to Play Cave at Miranda and take a private bus to return to the centre

I give permission for _____ to leave the centre for the above excursion.

Parent/guardian name _____ Signature _____ Date _____

Please select your child/children's meal choices by writing their name next to the selection of their choice below:

Fish Cocktail with fries and salad: _____

Chicken Schnitzel with fries and salad: _____

Lamb Souvlaki with fries and salad (GF): _____

Bowl of fries (GF): _____

Please read, tick and sign below:

- I understand that the educator child ratios will be maintained at a minimum of 1:15 for centre and 1:8 excursion days
- I understand that an excursion risk assessment has been completed prior to the event and is available upon request.
- I agree to abide by the policies and procedures of Connells Point Before and After School Care Centre Inc. and agree to notify staff if my child will be absent for a booked day of vacation care.
- I understand that any cancellations to vacation care days will not be refunded after the closing date.
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- I understand that payment for Vacation Care must be made by the closing date. If payment has not been made, I will be subject to losing a spot-on day requested.
- I understand that an annual enrolment form and registration fee must be paid before placement is guaranteed.

Parent/guardian name _____ Signature _____ Date _____

Friday 20th January 2023

Sydney Park

Leaving the centre for approx. 4.5 hours between 9:30am and 2:00pm we will take a private bus to Sydney Park and then take a private bus back to the centre. Children can bring scooters along to ride, please note bikes can NOT be taken. Helmets and enclosed shoes must be worn.

I give permission for _____ to leave the centre for the above excursion.

Parent/guardian name _____ Signature _____ Date _____

Please read, tick and sign below:

- I understand that the educator child ratios will be maintained at a minimum of 1:15 for centre and 1:8 excursion days
- I understand that an excursion risk assessment has been completed prior to the event and is available upon request.
- I agree to abide by the policies and procedures of Connells Point Before and After School Care Centre Inc. and agree to notify staff if my child will be absent for a booked day of vacation care.
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- I understand that payment for Vacation Care must be made by the closing date. If payment has not been made, I will be subject to losing a spot-on day requested.
- I understand that an annual enrolment form and registration fee must be paid before placement is guaranteed.

Parent/guardian name _____ Signature _____ Date _____

Tuesday 24th January 2023

Ian Potter Wild Play Garden at Centennial Park

Leaving the centre for approx. 4.5 hours between 9:30am-2:00pm we will take a private bus to Centennial Park in Queens Park. Children will be in water so will need to have their swimming costumes, towels and a change of clothes

Please read, tick and sign below:

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- I understand that an excursion risk assessment has been completed prior to the event and is available upon request.
- I agree to abide by the policies and procedures of Connells Point Before and After School Care Centre Inc. and agree to notify staff if my child will be absent for a booked day of vacation care.
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- I understand that payment for Vacation Care must be made by the closing date. If payment has not been made, I will be subject to losing a spot-on day requested.
- I understand that an annual enrolment form and registration fee must be paid before placement is guaranteed.

Parent/guardian name _____ Signature _____ Date _____

Wednesday 25th January 2023

Zoom Archery

Fun Day In

Zoom Archery will be taking place at the centre

Below is the Student Registration Waiver Form that the parents will need to sign before the workshop:

<https://waiver.smartwaiver.com/w/5f962ff0c9c66/web/>