

# VacFun

## ENROLMENT FORM

### December 2011 / January 2012

Name: \_\_\_\_\_ D.O.B.: \_\_\_\_\_  
 Name: \_\_\_\_\_ D.O.B.: \_\_\_\_\_  
 Name: \_\_\_\_\_ D.O.B.: \_\_\_\_\_

Name of Parent/Caregiver: \_\_\_\_\_

Address: \_\_\_\_\_ Suburb \_\_\_\_\_ P/C \_\_\_\_\_

Email: \_\_\_\_\_

Phone : \_\_\_\_\_ (Hm) \_\_\_\_\_ (Wk) \_\_\_\_\_ (Mb)

Alternate/Emergency Contact: - Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Any health problem we need to be aware of (e.g.) bee sting allergy, food allergy, asthma, medications: \_\_\_\_\_

Childcare Receipt Required                      Yes / No                      Date Issued.....

#### Date and Times enrolled for:

DATE	TIME	PD	DATE	TIME	PD	DATE	TIME	PD	DATE	TIME	PD
Mon 19 Dec			Mon 9 Jan			Mon 16 Jan			Mon 23 Jan		
Tues 20 Dec			Tues 10 Jan			Tues 17 Jan			Tues 24 Jan		
Wed 21 Dec			Wed 11 Jan			Wed 18 Jan			Wed 25 Jan		
Thurs 22 Dec			Thurs 12 Jan			Thurs 19 Jan			Thurs 26 Jan	<b>CLO</b>	<b>SED</b>
Fri 23 Dec			Fri 13 Jan			Fri 20 Jan			Fri 27 Jan		

#### Waiver & Declaration

I, the undersigned approve of the enrolment and agree to abide by the rules and conditions of the VacFun program and meet any costs. I authorise you in the event of any unforeseen accident or illness to obtain such medical assistance as is required and agree to meet expenses attached hereto.

I also accept full responsibility for my child's belongings whilst attending the program. I fully understand that if my child / children continuously misbehave I will be notified and my child / children may be removed from the program.

I, the undersigned agree that neither the Blackwood Community Recreation Association Inc. nor its employees and agents will be liable for any losses, damages and or injury incurred and / or sustained by the above child / children in attending the school holiday program.

I, the undersigned acknowledge the holiday program may use the oval alongside the recreation centre and the Blackwood Primary playground area. I allow my child / children to venture to the oval and playground under supervision within the guidelines of the holiday program. I will supply sunscreen, hat and adequate protection from the elements as is required.

Signature: \_\_\_\_\_

Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

#### PHOTOGRAPHS

I agree/do not agree to photographs of my child/children being taken and used for promotional/marketing purposes in print form and/or on the website.

Signature: \_\_\_\_\_

Date: \_\_\_\_/\_\_\_\_/\_\_\_\_