



Permission/Authorisation for Extra Curriculum Activity — 2024

This permission form meets the relevant regulatory requirements outlined in the Education & care Services National Regulations Part 4.2 Division 6-99& Part 4.7 – Division 1 – Subdivision 1 - I58 & I60

| Se | rvice / Centre: | : Please | tick: | | | | | | | | | |
|---|--|--------------|--------------------|-------|------------------------|---------|-------------------------|-------|-----------|-----------------|----------|--|
| | Cromer Kids Club | □ St . | Johns Kids Club | | St Kevins Kids Club | | St Josephs Kids Club | | | ose Kid Club | ls | |
| re th A d | You have advised your child/ren will be attending an extra curriculum activity after school. You are required to read the information provided below and sign this Permission/Authority and to complete this Form. You must be listed on the child/ren's enrolment record as either their Parent or an Authorised Nominee. We will attempt to provide afternoon tea for your child/ren depending on departure or arrival time. Child(ren) Name: | | | | | | | | | | | |
| • | • | | | | | | | | | | | |
| Activity Attending: Please fill out an individual form for each activity | | | | | | | | | | | | |
| Activity Location / address: | | | | | | | | | | | | |
| | nsite: | I acce | pt an OOSH | North | ern Beaches educ | ator wi | Il drop off & colle | ct my | child (o | n site o | nly) | |
| | ffsite: | | | | | | | | | | | |
| Name of person dropping to activity: | | | | | | | | | | | | |
| Name | of person colle | cting fron | n activity: | | | | | | | | | |
| Name | & contact numbe | r of perso | n(s) running t | he ac | tivity: | | | | | | | |
| When will your child be absent from the service? Date Starting: | | | | | | | | | | | | |
| | One off event | | Weekly d | uring | term (circle tern | n need | ed) | 1 | 2 | 3 | 4 | |
| • | Please tick the on □ Tues | • | • | Thur | s □ Fri | Δ | bsent from: | | | PM | 1 | |
| | | | PM | | | | | | | | <u>-</u> | |
| □ Returning at: □ Not returning | | | | | | | | | | | | |
| Par | ent / Guardiaı | • | | | | | | | | | | |
| | I accept that OOSH Northern Beaches (Responsible Person) will sign my child out of the centre care for the duration of the activity & then sign them back in upon their return to the service. | | | | | | | | | | | |
| | | - | • | | • | | | super | vision (d | on site (| only) | |
| | I accept my child has my permission to depart / arrive late to after school care, under supervision (on site only). I accept that my child(ren) attending & traveling to & from activities during an OOSH session will not be under | | | | | | | | | | | |
| | the supervision of OOSH Northern Beaches Staff. | | | | | | | | | | | |
| | In understand OOSH Northern Beaches staff are not responsible for my child whilst they are absent from the | | | | | | | | | | | |
| | OOSH service. I am listed on the child's Enrolment Form as a Parent or Authorised Nominee & the contact details, including al | | | | | | | | | | | |
| _ | emergency con | ıtact detail | ls, listed on m | | d's Enrolment For | | | | | | | |
| | updated contact details above. I understand that the 'Declaration and Indemnity' on the annual Registration Form is current and valid in relation | | | | | | | | | | | |
| | to this authority | | | | • | J | | | | | | |
| | | | | | | | | | | | | |
| Na | me of Authorise | ed Parent | / Guardian: | | | | | | | | | |
| Sig | nature: | | | | | | Date | e: | | | | |
| | | | | | | | | | | | | |