

Name of Service

Child's Full Name

Parent /Carer 1 Name:

Contact Number:

Parent /Carer 2 Name:

Contact Number:

ACTIVITY DETAILS & LOCATION /TIMES

Activity	Where	Provider Details Eg. Name, Organisation, Mobile	Collection & Return Arrangements with Provider	Start Date	Finish Date	MON		TUES		WED		THURS		FRI	
						Child Departs	Child Returns	Child Departs	Child Returns	Child Departs	Child Returns	Child Departs	Child Returns	Child Departs	Child Returns
<i>Example: Tennis</i>	<i>Courts</i>					3.15	4.15							3.15	4.15

OSHC recognises that children may attend extracurricular activities that are not a part of the Outside School Hours Care Program, on the school grounds.

This consent form must be supplied to the OSHC prior to any such arrangement commencing.

I understand and accept that:

- I agree that my child will attend the OSHC at the conclusion of class and will be released from the OSHC to attend the above extracurricular activity, unless stated otherwise above. The child will be signed out of the service's care by an OSHC staff member.
- I acknowledge that my child will be unescorted during the journey to / from the OSHC to the extracurricular activity.
- The child will be anticipated back at OSHC at the nominated time as stated above and signed back into the service, unless parents have indicated that they will be collecting their child on the table above.
- Any alterations in times or arrangements must be notified in writing prior to the change occurring.
- I understand that at no time will OSHC staff be present at the extracurricular activity.
- I understand that should the extracurricular activity be cancelled after my child has arrived at the activity location, my child will need to return immediately to the OSHC.
- I understand it is my responsibility to notify the OSHC if my child's extracurricular activity is cancelled in advance of its start time.
- I agree that the OSHC can inform the school that my child will be attending extracurricular activities.

Parent/Carer 1 Signature

Date

OFFICE USE ONLY

Staff Member:

Date:

Date Entered: