



Phone: 8277 4486
Mobile: 0428 257 789
Email: robyn.shanahan17@schools.sa.edu.au

Vacation Care Consent Form

Our Service has organized an excursion for your child to attend. All the relevant details are provided below for your convenience. The service has conducted an Excursion Risk Assessment which is available for your review upon request.

For your child to attend, you are required to read this information and complete the Vacation Care Excursion Consent Form. To complete this form, you must be listed on the child's enrolment form as either their parent or an Authorised Nominee.

Excursion Staff Ratios

1 carer: 8 children

1 carer: 5 children for water activities(eg Boating, swimming)

To ensure your children can participate in all programmed activities,
please provide a wide brimmed or bucket hat for outdoors.

Westminster Swimming Pool

Date: Tuesday 10 January 2023

Destination: Westminster Swimming Pool

1/23 Alison Avenue

MARION SA 5043

Departure time: 8.45 am

Return time: 12.30 pm

Transport: Walking

Please be advised:

Child:staff ratio - 39 children: 5 staff

Westminster Swimming Pool – 10/1/23

I give permission for

to attend the above excursion as described. I will provide my children with a wide brimmed or bucket hat for any outdoor activities.

By signing the Vacation Care Excursion Consent Form, I agree to and understand the following:

- My child has my permission to attend this excursion.
- I am listed on the child's enrolment form as a parent or authorised nominee.
- I have read the details provided by the service and understand that I can access the Excursion Risk Assessment on request at the service.
- The contact details (including all emergency contact details) listed on my child's enrolment form are up to date.

Parent/carer signature: _____ Date: _____