



ALLAMBIE HEIGHTS CHILDREN'S CENTRE VACATION CARE

Applicant Indemnity & General Conditions

I hereby give consent for the participant(s) named above to attend the prescribed activities. I acknowledge that during participation in the activity my child(ren) will be exposed to the obvious risks associated with such activities. I indemnify Allambie Heights Children's Centre Vacation Care, its educators and agents and keep them indemnified against all claims, demands, actions and liabilities of any kind (other than due to wilful negligence) arising from my child's/children's participation in the activity. I authorise Allambie Heights Children's Centre Vacation Care staff, in the event of any accident or illness involving my child(ren), to obtain such medical assistance as they believe may be required and agree to meet all expenses thereby incurred. I understand the booking terms and conditions. I give permission for my child(ren) to attend any excursions/incursions programmed on the days they are enrolled. I acknowledge that G and PG rated movies may be shown at the centre. I give permission for my child to attend and have read the risk assessment and information contained in the School Holiday brochure/website for the excursions programmed on the days I have selected on this form. I have read the OSHC & Vacation Care Handbook and understand all the terms and conditions stated within the handbook. I agree that by signing this it covers for all future vacation care excursion/incursions operated by Allambie Heights Children's Centre.

If this form and the waivers for the excursions/incursions are not received and signed by a parent/guardian the booking will not be accepted

Please print this off, sign and send back with your booking form to vacationcare@allambiekids.com.au

Parent/Guardian Name: _____

Parent/Guardian Signature: _____ Date: _____