

Spring Holiday Care

29th September to 10thOctober 2025 Operating Times: 7:15am to 6:15pm

Late Pickup Fees Apply

Please read 'Things you need to know' information before submitting your form

Daily full fees are advised on the program

(your out of pocket costs are heavily reduced after your child care subsidy entitlement fee relief)

IMPORTANT - CONFIRMATION PROCESS:-

ALL CONFIRMED BOOKINGS WILL APPEAR ON THE PARENT APP AND ARE FINAL.

ALL BOOKINGS will incur a charge REGARDLESS OF REASON FOR CANCELLATION.

Swapping of days is not permitted.

- Please write your child's full name (one per line) and tick the days you would like to book.
- If a day is fully booked, you will be notified by email.
- Spaces are subject to legal ratios and educator availability.
- If you have submitted a booking form and your bookings do not appear on the app after 2 business days, please contact OSHC.
- Bookings will not be accepted if your weekly OSHC fee payments are in arrears.

Week 1								
Child's First and Last Name	Mon 29/9 \$68.35	Tues 30/9 \$100.35	Wed 1/10 \$91.00	Thurs 2/10 \$68.35	Fri 3/10 \$77.50			
1.								
2.								
3.								

Week 2								
Child's First and Last Name	Mon 6/10 CLOSED	Tues 7/10 \$68.35	Wed 8/10 \$86.50	Thurs 9/10 \$94.00	Fri 10/10 \$68.35			
1.								
2.								
3.								

Both sides of this form are to be completed and signed

Office Use Only

Received at OSHC: Date: / /2025 Time: am/pm Staff Name:

FLAGSTAFF HILL HOLIDAY CARE - 29th September to 10th October 2025

Written Agreement between Flagstaff Hill Primary School OSHC and enrolling parent/guardian

Please confirm acceptance of your booking, session times and information below so that our service can receive Childcare Subsidy funding on your behalf to reduce your fees.

IMPORTANT - Please read and tick if you UNDERSTAND and AGREE:-

I have read the program information, including booking provided.	gs and cancellations, understand and agre	ee to comply with the information	
I understand that the program may change without not	tice due to circumstances outside of OSHC's	s control.	
I give permission for my child/ren to participate in the r participate at their own risk.	nominated programmed activities (includin	ng special visitors) and that they	
I give permission for my child/ren to participate in supelocal park and school neighbouring streets).	ervised local walks outside the school grou	nds (including Sturt Gorge, local shops	,
I give permission for my child/ren to watch PG movies.			
Adhering to the Safe Use of Digital Technologies Policy part of the learning program, for them to be displayed (secured platform).	_		
I agree that I am liable to pay all associated fees for my	y child's booked care.		
I understand OSHC closes at 6:15pm and I will incur a la 6:15pm.	ate fee of \$10 per 5 minutes or part thereof	f if my child/ren are picked up later tha	า
I understand the requirement for my child/ren to wear	sunsmart clothing.		
I understand the requirement for my child/ren need to	wear closed in shoes every day.		
Name of Parent/Guradian:	Signature:		_
Mobile:	Date:	//2025	
EXCURSION CONSENT Risk assessments for all excursions/special visitors h	nave been prepared and are available at th	ie service.	
I give CONSENT to the following:-			
CHILD/REN'S NAMES:			
Tuesday, 30/9/2025	Excursion to : Adelaide Zoo		
Transport: Willunga Bus charter (with seatbelts) Proposed Activities: Exploring animal habitats	Time Frame: 9:00 am -3:15pm	Staff Ratio 1:8	
Parent Signature:			
Thursday, 9/10/2025	Excursion to: Blackwood Recreat	tion Centre	
Transport: Willunga Bus charter (with seatbelts)	Time Frame: 9:15am - 12:30pm	Staff Ratio 1:8	
Proposed Activities: Roller skating			