



Chester Hill Neighbourhood Centre
SCHOOL HOLIDAY FORM

Thursday 19th December 2024 until Wednesday 05th February 2025

School Vacation Care

5Yrs – 12Yrs (Kindy to years 6)

7:00am to 6:00pm

Chester Hill Neighbourhood Centre Aims

Chester Hill Neighbourhood Centre Out of School Hours Care and Vacation Care program is for all children to enjoy their time during the school holiday. This is achieved through a caring, secure and stimulating environment in which all children are given the opportunity to choose from a variety of activities from day to day.

Bookings will be accepted IN PERSON ONLY at the Childcare Centre.

Booking will start on Tuesday 10th of December 2024.

All booking must be made before Wednesday 18th of December 2024 to help the Centre to manage booking the accurate ratio of staff.

Priority given for working parents.

The Centre can accept 85 children each day.

Phone: 9743 8089 Mob: 0407 227 059

Address: 231 Wellington Rd. Chester Hill, NSW 2162

FEES:

- Booking Fee per child per day is \$50 per day includes the cost of excursions.
- Casual booking per child per day is \$53 per day including the cost of excursions.
- All families are eligible for Childcare Benefit. To obtain more information about Childcare Benefits call Family Assistance Office on 13 61 50
- **CCS hours may vary depending on entitlement. Please contact Centrelink to confirm your eligible hours per fortnight.**
- A \$200 bond is required for new enrolments. This bond will be refunded once all outstanding fees are paid in full.
- Bookings cannot be cancelled on the same day. Parents/guardians must notify the centre 48 hours in advance of the cancellation. If not, the child will be marked as absent.
- "A minimum of two weeks' notice is required for the full cancellation of any permanent bookings during Vacation Care."
- Children should not be dropped off at the Centre before 7:00 am and collected no later than 6:00pm. A late fee of \$1 per one minute per child to cover overtime payable to staff.

EXCURSIONS/INCURSIONS:

These are an essential part of the Vacation Care Program to allow the children to experience an enjoyable holiday. Excursions and Incursions are part of the daily fees. Parents are expected to sign the excursion permission prior to their child being accepted on any excursion. Appropriate clothing and footwear should be worn on excursions and at the Centre - no exceptions. All children must have a hat that always covers the back of the neck and ears.

Children must bring their packed lunch and water and fruit break. All children booked in on an excursion day are required to be at the Centre by 8:00am sharp, unless advised on the program, or told before of any changes.

SICKNESS/ACCIDENT:

If your child/ren is not attending the Centre on any day in which he/she is enrolled, please contact Centre staff by 8:00am particularly on excursion days. Fees will still be applicable for this day. In the event of illness or accident whilst at the Centre, appropriate procedures will be followed as per the Centre's Policy. (Refer to Chester Hill Neighbourhood Centre Policy Folder)

MEDICATION

If your child requires medication give it directly to a staff member, ensure it is in its original container and sign the medical administration form. If your child has Asthma, parents please provide us with an Asthma Action Plan to be completed in consultation with and signed by a medical practitioner and to be updated regularly. It is a requirement to have a doctor treatment plan provided by parents/ guardians. A risk minimisation plan is to be developed for every child with asthma or any allergy.

GUIDING CHILDREN'S BEHAVIOUR:

For the enjoyment and safety of all children attending the Centre, the Centre rules are displayed for everyone to view. Your cooperation in encouraging these rules would be greatly appreciated. All children and staff must display mutual respect and co-operation. In the event of serious or continued disruptive behaviour, a child may be refused acceptance to excursions and /or continued attendance at the Centre.

IMPORTANT ADDITIONAL INFORMATION:

Please remember that parents are required to download and use the Xplor app for signing their children in and out each day. This helps streamline the check-in/check-out process and ensures accurate attendance records.

Payment in full is required by the closing date for all days booked. All days booked and paid for are not transferable.

FOOD

Please provide a healthy lunch which is enough for the whole day, provide morning tea (Fruit Break), lunch and afternoon tea for your child.

Peanuts or peanut products and Nutella are not permitted, due to children with life threatening allergies; please do not send food for your child with peanuts or peanut product please check labels on foods.

December- January 2024 School Holiday Vacation Care

Booking Authorisation Form

Child/ren Family Name	1st child's Name/ Age	2nd Child's Name/Age	3 rd Child's Name/Age	4 th Child's Name/Age
Thursday 19/12/2024 Technology Day (Centre Run Day) All Children				
Friday 20/12/2024 Picnic Day (Centre Run Day) All Children				
Monday 23/12/2024 Bankstown Splash (Excursion) Age group (5-8 years) Other ages remain at centre				
Tuesday 24/12/2024 Auburn Reading Cinema (Excursion) Age Group (9-12 years) Other ages remain at centre				
<p>The Centre will be closed for the Holidays from December 25th to January 12th.</p> <p>We will reopen on Monday, January 13th 2025</p>				
Monday 13/01/2025 Wheels Day (Centre Run Day)				
Tuesday 14/01/2025 Turbo Climbing (Excursion) Age group (5-8 years) Other ages remain at centre				
Wednesday 15/01/2025 Pyjama Day (Centre Run Day)				
Thursday 16/01/2025 Bankstown Splash (Excursion) Age group (9-12 years) Other ages remain at centre				
Friday 17/01/2025 Auburn Reading Cinema (Excursion) Age Group (5-8 years) Other ages remain at centre				
Monday 20/01/2025 TimeZone Bowling Villawood (Excursion) Age Group (5-8 years) Other ages remain at centre				
Tuesday 21/01/2025 Raptor Reptiles (Incursion) All age groups				

Wednesday 22/01/2025 (Centre Run Day) Manoush baking activity All Age groups				
Thursday 23/01/2025 Flip out (Excursion) Age group (9-12 years) Other ages remain at centre				
Friday 24/01/2025 Celebrate Australia Day (Centre Run Day)				
The Centre will be closed on Monday, 27th January due to Public Holiday "Australia Day holiday"				
Tuesday 28/01/2025 New year's Celebration (Centre Run Day)				
Wednesday 29/01/2025 Flip out (Excursion) Age group (5-8 years) Other ages remain at centre				
Thursday 30/01/2025 Bowling Time zone (Excursion) Age group (9-12 years) Other ages remain at centre				
Friday 31/01/2025 Laser Tag (Inursion) All age groups & Crazy Hair Day (Centre Run Day)				
Monday 03/02/2025 First Nations (Inursion)				
Tuesday 04/02/2025 Turbo Climbing (Excursion) Age group (9-12 years) Other ages remain at centre				
Wednesday 05/02/2025 Wheels Day (Centre Run Day)				
TOTAL				

Add subtotal of all "care" columns together

Parent Agreement and Authorisation

Account Name: _____

Fees

Daily Charge will be \$50 for permanent, and \$53 for casual.

I agree to enroll my child/ren at the Chester Hill Neighbourhood Centre School Holiday Program commencing on **Thursday 19th December 2024 until Wednesday 05th February 2025**

Thursday 06th February 2025 is the first day of school. In applying for enrolment, I hereby acknowledge that I am wholly responsible for all fees payable in advance to Chester Hill Neighbourhood Centre, in respect of the days of care requested by me for my child/ren.

Refunds- Fees paid for school holiday care are not refundable for absentees or cancellation.

Permission for Staff to Act in Case of Emergency

In the case where a child has a temperature of 37.5 degrees, parents will be contacted to collect the child. If an accident requires immediate professional medical attention, the Centre will contact the parents (or emergency contact if parents are not available). At the same time as contacting medical assistance. If, in the opinion of the Director /Supervisor, your child requires immediate medical attention at any time at the Centre, your child may be taken by ambulance to the Hospital.

Signed _____ Name: _____ Date: _____

PG Rated Movies

I give permission for my child/ren to watch PG rated movies at the centre or at the movies during this vacation care.

Signed _____ Name: _____ Date: _____

Please make sure all details are filled

CHILDREN'S DETAILS

Surname: _____ First Name: _____

Surname: _____ First Name: _____

Surname: _____ First Name: _____

Surname: _____ First Name: _____

Address: _____

Email address: _____

CONTACT NUMBERS:

Mother: (H) _____ (W) _____ (M) _____

Father: (H) _____ (W) _____ (M) _____

EMERGENCY CONTACTS:

Name: _____ Phone _____

Name: _____ Phone: _____

Please ensure emergency contacts are not parents or guardians. We need someone who can be reached if parents are unavailable.

Permission for Excursions: I hereby give permission for the above Child/ren to participate in the excursions from Chester Hill Neighbourhood Centre Vacation Care by foot or by bus/train within the local Community and / or as per the program.

Signature of parent/guardian: _____ Date: _____

Medical History Details: Are there any allergies or specific medical conditions the Centre staff should know about on a day-to-day basis? Please list below.

Family doctor: _____ Phone: _____

Medicare Number: _____

Although every care will be taken of your child/ren **it is advised that you encourage your child to always behave in a responsible manner.** Our educators have current First Aid qualifications and can administer the required first aid treatment if necessary. In the event of an accident or illness requiring additional medical treatment, every effort will be made to contact the parents before such treatment is sought. However, should this prove to be impossible, it will be necessary for authority to be given to the Director and authorized supervisor to make the Decision for the treatment to be undertaken.

Medical Consent: I hereby give permission for the Director /Authorized Supervisor to seek medical attention for the above child/ren in the event of an emergency.

Signature: _____ Date: _____