



VACATION FUN Program

Ph: 1300 553 583

**Week 1 –
Dec 17 - 22**

**Thursday 17th
December
WET & WILD**

Let's have fun and get
wet – it's the holidays
after all.



**Friday 18th December
MOVIE DAY**

Sit back and relax its
MOVIE TIME.



**Monday 21st December
GAMES DAY**

Bring along your
favourite games or play
some of ours – challenge
the teachers



**TUESDAY 22ND
December
WET & WILD**

Let's have fun and get
wet – it's the holidays
after all.



**Crestwood
Public School**

Why be **BORED** at home these holidays...

no **POOL**...

no **OUTINGS**...

no **FUN**...

We can fix that!

JOIN us and have a **BLAST**.

Check out WWW.VACATIONFUN.COM.AU



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Week 2 – Jan 4 - 8

**Monday 4th January
SAND ART & PLASTER
PARTY**

Have fun with these cool
sand and plaster arts.



**Tuesday 5th January
MUSEUM OF FIRE**

Ride the Fire Truck and
learn about Fire Safety
and become a Cubby
Fire Warden.



**Wednesday 6th January
Wii CHALLENGE**

We have the best Wii
games for you to try. Use
your "Cubbycard" to rent
DS Games too.



Thursday 7th January

BOWLARAMA
Can you score a
STRIKE?



**Friday 8th January
WHEELS GALORE**

Bring your bikes,
scooters, skates and
blades.



No helmet no fun

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Week 3 – Jan 11 - 15

Monday 11th January
**WATERWORLD
CHALLENGE**

Water Bombs at the ready. Kids vs Teachers.



Tuesday 12th January
**MINI GOLF @ SYDNEY
OLYMPIC PARK**
Hole in One



Wednesday 13th
January
**AUSTRALIAN IDOL
THE CLUB STYLE**

Idol

NOT JUST FOR
SINGING

Thursday 14th
January
**POWERHOUSE
DISCOVERY CENTRE**
WEIRD & WACKY



Friday 15th January
MOVIE MADNESS
Fantastic Movie Choices
– make your own Choc
Top then sit back and
relax



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Week 4 – Jan 18 - 22

Monday 18th January
KITCHEN CHEMISTRY
Experiments from your
kitchen cupboard
from Sherbet to Goop.



Tuesday 19th January
COCKATOO ISLAND
Its Treasure Hunt time
ON A REAL ISLAND.



Help Find Captain
Thunderbolt.

Wednesday 20th January
CLOWN MAGIC
Learn Magic tricks, Circus
Skills and Balloon Animals
from a real clown



Thursday 21st January
IMAX & AQUARIUM
See "Under the Sea" in
3D at IMAX then see the
real thing when we visit
the Aquarium.



Friday 22rd January
CHILDREN'S CHOICE
&
WATERWORLD
CHALLENGE



**Crestwood
Public School**



VACATION FUN ENROLMENT FORM 17/12/09-22/1/2010

For staffing & food purposes, we ask that you complete this form by no later than 14th December 2009, and hand it to your Centre Supervisor or fax to 02 8905 9279 or email to bookings@vacationfun.com.au

General/Account enquiries: 1300 553 583 **Fax:** 02 8905 9279 **Email:** bookings@vacationfun.com.au

LOCATION/CONTACT DETAILS

Please tick the Centre your child/children will be attending

Crestwood Vacation Fun
Crestwood Public School
Kalimna Dr, Baulkham Hills
Hours: 7:00am-6:00pm
CCMSID: 1-631-241
PRN: 406 950 269T

Mowbray Vacation Fun
Mowbray Public School
Mowbray Rd, Lane Cove
Hours: 7:00am-6:00pm
CCMSID: 1-6PX-2012
PRN: 407 208 925V

Gosford East Vacation Fun
St Patrick's Primary School
Cnr York & Melbourne Sts, Gosford East
Hours: 7:00am – 6:00pm
CCMSID: 1-18JP8M
PRN: 407 331 030L

You will need to contact Centrelink to link your child to the vacation care centre to be able to receive the CCB fee reduction.

PROGRAM

Packages – WOW! We have great packages available:

Pre Christmas	Daily Rate	\$45.00 per day*
Keen is Fifteen	15 days	\$810.00 + one free Excursion day at our Easter Vacation Care program*
The Perfect Ten	10 days	\$550.00 + one free Incursion day at our Easter Vacation Care program*
The Five Jive	5 days	\$285.00*
Three's a Breeze	3 days	\$192.50*
One for fun	1 day	\$50.00 per day for Incursions. \$75.00 per day for Excursions*

*Check out our website at www.vacationfun.com.au for further details and inclusions on our great packages.

Please tick the days that your child/children will be attending: (Refer to front page for program details)

Child (1) Name: _____

Thur 17.12.09	Fri 18.12.09	Mon 21.12.09	Tue 22.12.09	Mon 04.01.10	Tue 05.01.10 excursion	Wed 06.01.10	Thur 07.01.10 excursion	Fri 08.01.10	Mon 11.01.10
Tue 12.01.10 excursion	Wed 13.01.10	Thur 14.01.10 excursion	Fri 15.01.10	Mon 18.01.10	Tue 19.01.10 excursion	Wed 20.01.10	Thur 21.01.10 excursion	Fri 22.01.10	

Child (2) Name: _____

Thur 17.12.09	Fri 18.12.09	Mon 21.12.09	Tue 22.12.09	Mon 04.01.10	Tue 05.01.10 excursion	Wed 06.01.10	Thur 07.01.10 excursion	Fri 08.01.10	Mon 11.01.10
Tue 12.01.10 excursion	Wed 13.01.10	Thur 14.01.10 excursion	Fri 15.01.10	Mon 18.01.10	Tue 19.01.10 excursion	Wed 20.01.10	Thur 21.01.10 excursion	Fri 22.01.10	

Child (3) Name: _____

Thur 17.12.09	Fri 18.12.09	Mon 21.12.09	Tue 22.12.09	Mon 04.01.10	Tue 05.01.10 excursion	Wed 06.01.10	Thur 07.01.10 excursion	Fri 08.01.10	Mon 11.01.10
Tue 12.01.10 excursion	Wed 13.01.10	Thur 14.01.10 excursion	Fri 15.01.10	Mon 18.01.10	Tue 19.01.10 excursion	Wed 20.01.10	Thur 21.01.10 excursion	Fri 22.01.10	

PARENT INFORMATION

ENROLMENT PROCEDURE: Complete the enrolment form, and either:

- Fax: 8905 9279
- Email: bookings@vacationfun.com.au
- Post: PO Box 8239, Baulkham Hills, NSW 2154
- In person: Hand it in to one of our Centres

FEES:

\$50 per standard day. \$25 Excursion Fee applies on Excursion Days.

Once the enrolment form is received at Head Office and the booking has been confirmed, the whole amount will be deducted on 15th December 2009, and we will be unable to issue any refunds. If booking after the 15th December, payment will be accepted on the day of booking by credit card only.

CHILD CARE BENEFIT

We must have a copy of your current assessment notice from the Family Assistance Office before we can apply the Child Care Benefit to your enrolment fees.

COURT ORDERS

If your child is affected by court orders, please attach a copy to this enrolment form, and a photograph of any person/persons who are refused access to your child/ren

LATE FINES

If your child has not been collected from the centre by 6pm, a late fee of \$5.00 per minute will be charged.

PAYMENT DETAILS

Total Number of Days / Package Name

OPTION 1: Direct Debit Payment Tick if you would like us to use your existing direct debit details

Child/Children's Name:.....

I.....hereby give Cubbyhouse Childcare Australia permission to deduct \$.....from my bank account for the Vacation Care commencing.....

Account Name:..... Financial Institution.....

BSB (6 digits) _ _ _ _ _ Account No:.....

Name:..... Signature.....

Daytime contact No:..... Date:.....

OPTION 2: Credit Card Payment Tick if you would like us to use your existing credit card details

Child/Children's Name:.....

I hereby consent to Cubbyhouse Childcare Australia to deduct fees from my Credit Card account.
(A 3% surcharge will be levied on every transaction)

Bankcard **Mastercard** **Visa**

Cardholders name:..... Phone:.....

Credit Card Number:

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Expiry Date:

--	--	--	--

Amount \$

Signature..... Date:.....

Amex

Expiry Date:

Amount \$

Signature..... Date:.....

TERMS OF ENROLMENT

Photos and videos may be taken for display, accreditation and advertising purposes at the Centre. Parents consent to such is given when parents sign this form. **Please provide children with morning tea and lunch.** Afternoon tea will be provided. Hats, sunscreen and suitable footwear must be worn before outdoor play is permitted. There will be in-house entertainment organised at an additional cost per child per activity. **It is compulsory to attend the entertainment and I agree to my child's participation.** Please do not bring skateboards, bikes, skates etc. No responsibility will be taken for lost or stolen items.

According to new State guidelines, copies of immunization records are necessary for children. In an event of an emergency, accident or illness concerning my child and the Centre staff not being able to contact me or the other person so authorised by me, I consent to the Centre seeking on my behalf, medical or hospital attention for my child and I accept financial responsibility for expenses incurred. I understand that children with a contagious disease will not be accepted.

NO FOOD CONTAINING PEANUT PRODUCTS OR TRACES OF PEANUTS ARE TO BE TAKEN INTO THE CENTRE

Signed:..... Date:.....

GENERAL INFORMATION

Child's (1) name:.....DOB:.....School:.....

Child 1 CRN:.....

Child's (2) name:.....DOB:.....School:.....

Child 2 CRN:.....

Child's (3) name:.....DOB:.....School:.....

Child 3 CRN:.....

Address.....

Mother's name:.....Ph:.....Mob.....

DOB __/__/__ CRN:.....

Father's name:.....Ph:.....Mob.....

DOB __/__/__ CRN:.....

Mother's wk ph:.....Father's wk ph:.....

Preferred email:.....

Expected daily arrival:..... Departure.....

Please state if there are any custody orders (and if so, please attach a copy)

.....

Please state any religious or cultural requirements we need to abide by whilst caring for your child

.....

Are there any activities in particular that your child enjoys?

.....

EMERGENCY CONTACTS/DETAILS

If we cannot contact in the case of an emergency, who do you wish us to call?

1. Name:..... Relationship..... Phone:.....

2. Name:..... Relationship..... Phone:.....

3. Name:..... Relationship..... Phone:.....

MEDICAL DETAILS

Please note if there are any medical details or allergies the Centre Supervisor should be aware of:
(Please attach action plans)

.....
.....
.....

Medicare Number:.....

Doctor:..... Ph:.....

Do you give the Centre authority to call an ambulance? YES/NO

NOTE: If your child requires Ventolin or an Epi-Pen, a permission note and the medication must be supplied by the parent. It is our policy that under no circumstances can any medication (excluding Ventolin and Epi-Pen) be brought into our Service for children to either administer themselves or be assisted by staff. If your child is found to have medication on them you will be contacted immediately to come and collect the child and the medication.

INDIVIDUAL HEALTH PLAN- Vacation Care

Child's name: _____

DOB _____

Medical History:

Medical Conditions:

Health Management Plan:

CONTACT DETAILS

Doctor's name: _____

Doctor's Ph: _____

Parent name: _____

Parent ph: _____

Parent name: _____

Parent Ph: _____