**OSHC & Vacation Care Checklist**

Enrolment Package Completed or Booking Form Updated (CWA).

Immunization Records supplied to service.

Any diagnosed medical condition Action Plan supplied to service including doctor signature.

Have you signed your child/children Minimization Action Plan provided by the service?

Medication in original packaging supplied to service if or when required.

Any Court Order currently in place supplied to service.

Is your MyGov account up to date?

Have you completed your Assessment for eligibility for CCS subsidy? Remember to go back into your MyGov account to confirm placement if your child has not attended for 8 weeks or more. Let the service know once confirmed so the service can apply your CCS subsidy.

**Viewing of ‘PG’ Rated Media**

At times, teachers may wish to screen DVDs for students which support and enhance student learning. DVDs which are ‘G’ rated may be shown without parent consent, however viewing ‘PG’ rated DVDs requires written permission from parents/guardians. Consent to your child viewing DVDs in the ‘PG’ category will assist with classroom programs and planning across the school. Wherever possible you will be informed prior to your child viewing ‘PG’ rated movies.

**Student Photos and Work for Displays, Media & Website**

Photographs or digital footage of students involved in a range of curriculum programs and school activities is often recorded. Sometimes these images are selected for publication on our school website or Facebook page, in the school newsletter, displays in and out of the school, in the local media, or in external publications such as magazines.

If your child is included in photographs or other digital content recorded during school activities that is selected for public display, we seek your permission for it to be used to publicise our programs and promote our school. Students’ full names are not published with photographs/footage.

I consent to my child viewing selected ‘PG’ rated films

**I understand and agree to my child’s image/digital content to be included in:**

School website

School newsletter

Displays in and out of school and OSHC

External publications such as newspapers, brochures

**Confirmation of Childcare Agreement**

Parties to the Agreement

Between: Name of Parent/Guardian: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

And: **Mt. Evelyn Primary School Combined OSHC** ABN: 91029712060 (Provider)

For the Care of: Child Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Start Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

By: Mt. Evelyn Primary School Combined OSHC (Service)

**Session and Fee Details**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Day requirements of Care** | **AM Permanent**$20.00 per session 6.30am -8.45am | **AM Casual**$25.00 per session 6.30am -8.45am | **PM Permanent**$30.00 per session 3.30pm -6.30pm | **PM Casual**$35.00 per session 3.30pm -6.30pm | **Vacation Care** $120.00 per session 6.30am -6.30pm |
| **Monday** |  |  |  |  |  |
| **Tuesday** |  |  |  |  |  |
| **Wednesday** |  |  |  |  |  |
| **Thursday** |  |  |  |  |  |
| **Friday** |  |  |  |  |  |

* As part of your enrolment at our service we require you to confirm acceptance of the above placement in order to be able to receive Government Funding on your behalf. Acceptance of these items as well as some of the information in the enrolment form can be used as a Complying Written Arrangement for Child Care Subsidy purposes. Please read these items and confirm by signing below.

**I confirm:**

* My details in the enrolment form, as well as the details of the child l am enrolling are correct.
* I have agreed to days of care within the service and understand the start and finish times of these sessions of care.
* Care maybe provided on a casual or permanent basis where available at my service at my request.
* I understand l am liable to pay fees for the care of my child as indicated above and if applicable in other information the service has given me (such as parent pack) which are subject to change over time based on advice from the provider and acceptance by me.

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_