



# EXTRA-CURRICULAR ACTIVITIES FORM (2016)

I give permission for my child/children, \_\_\_\_\_ to leave the care of Jindalee School Age Care Program in order to participate in extra-curricular activities at the school during these times indicated below.

I acknowledge the following statements and accept the following conditions:

- This is a courtesy service provided by SACP, and as such we cannot always guarantee an Educator is available to escort/remind them to attend this activity. Though we try our best, you acknowledge there may be instances where they may miss out on the activity. You accept SACP will not be liable for any extra fees or costs forfeited by their non-attendance.
- I accept that depending on circumstances my child may be un-escorted to/from these activities.
- I have reminded my child to ensure that they do not leave the service until instructed to do so by an educator.
- I understand whilst away from the service participating in this activity, my child will not be under the care of Jindalee School Age Care Program.
- I understand that responsibility for my child will once again be that of the service once my child returns to the service.
- I understand that I will still be charged for the time that my child is away from the service participating in extra-curricular activities.
- I undertake to ensure that I notify the service if and when this arrangement changes.

I will collect my child when the activity finishes:                      YES                      NO

Day	Period/Dates of Activity		Activity child will be participating in	Timeframe	
	Start date	Finish date		Start Time	Finish time
MONDAY					
TUESDAY					
WEDNESDAY					
THURSDAY					
FRIDAY					

Parent Name: \_\_\_\_\_

Parent Signature: \_\_\_\_\_ Date: \_\_\_\_\_