

# EPOSHC - Extra-curricular Activity Permission Form



|   |  |
|---|--|
| Childs Name:  |  |
| <b>Extra-curricular Provider and Activity details</b> |  |
| Organisation:   |  |
| Contact name:   |  |
| Contact number:                                       |  |
| Type of activity:                                     |  |
| Location of Activity:                                 |  |

|                  | Period of activity<br>Date and Time |                    |                      |                    | Escort                   |                          | Collection/Pick-up by    |                          |
|------------------|-------------------------------------|--------------------|----------------------|--------------------|--------------------------|--------------------------|--------------------------|--------------------------|
|                  | Date                                |                    | Time                 |                    | Provider to collect      | OSHC to escort           | Parent/Carer             | OSHC service             |
| <b>Monday</b>    | <i>From</i><br>_____                | <i>To</i><br>_____ | <i>From</i><br>_____ | <i>To</i><br>_____ | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| <b>Tuesday</b>   | <i>From</i><br>_____                | <i>To</i><br>_____ | <i>From</i><br>_____ | <i>To</i><br>_____ | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| <b>Wednesday</b> | <i>From</i><br>_____                | <i>To</i><br>_____ | <i>From</i><br>_____ | <i>To</i><br>_____ | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| <b>Thursday</b>  | <i>From</i><br>_____                | <i>To</i><br>_____ | <i>From</i><br>_____ | <i>To</i><br>_____ | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| <b>Friday</b>    | <i>From</i><br>_____                | <i>To</i><br>_____ | <i>From</i><br>_____ | <i>To</i><br>_____ | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

- I have communicated to my child that they are not to leave the service before being signed out by an EPOSHC Educator
- I have communicated to my child that when an activity commences immediately after school ends, that they are to go to their EPOSHC sign-in area first to be signed in by an Educator
- I have communicated to my child that an EPOSHC Educator will be escorting them to their activity and that whilst on route they will follow the EPOSHC Educators directions
- I understand that whilst away from the EPOSHC service and at the activity that my child is not in the care of Everton Park SS OSHC
- I understand that responsibility for my child by EPOSHC will resume once my child is collected from the activity at the designated time
- I understand that if my child is booked into EPOSHC that I will still be charged for the time that my child is away from the service
- I understand to notify the service if this arrangement changes and at that time I will complete a new Extra-curricular Activities Form if required
- I understand that if the information above is altered on the day, the escort will not proceed unless written authorisation is given by the parent/carer
- I understand I am required to notify the service in writing if my child is no longer attending the activity as detailed above

|                                   |                  |             |
|-----------------------------------|------------------|-------------|
| <b>Parent/Carer Authorisation</b> |                  |             |
| Name: _____                       | Signature: _____ | Date: _____ |