Vacation Care – Private School Week

To enrol your child in a Kidszone Vacation Care Program for the school holidays, you need to:

1. Ensure your child is enrolled at Kidszone Australia. If not, an enrolment form needs to be filled out for each child attending.
2. Ensure your MyGov details are up to date.
3. Complete the Kidszone Australia Vacation Care booking form (this form).

Please Note

- 1 weeks' notice is necessary for changes to booked days, this is to allow for correct staffing and resources.
- Bookings will not be accepted if any fees are still owing from previous Vacation Care periods.
- All booked days are recurring from week to week over a school holiday period unless approved by the centre Directo

Children's Details:

Child 1: **First Name** _____ **Last Name**_____ **Age** _____

Child 2: **First Name** _____ **Last Name** _____**Age** _____

Child 3: **First Name** _____ **Last Name** _____ **Age**_____

Child 4: **First Name** _____ **Last Name** _____ **Age**_____

Parent / Guardian Contact Details – Parent 1 (have these details been updated with the office?)

First Name _____**Last Name**_____

Email _____

Home Phone _____**Work Phone** _____**Mobile**_____

Parent / Guardian Contact Details – Parent 2 (have these details been updated with the office?)

First Name _____**Last Name**_____

Home Phone _____**Work Phone** _____**Mobile**_____

Medical / Behavioural Needs

Do any of your children have any medical or behavioural issues that the staff at Kidszone need to be aware of?

Yes ☐ **No** ☐ (if yes, please indicate which child/ren) **Child** 1 ☐ **Child** 2 ☐ **Child** 3 ☐ **Child** 4

Please specify / detail the medical / behavioural diagnosis, how it affects the child/ren and what management plans are in place including medications. It is a Kidszone policy that all action plans and medication forms be reviewed, and changes made before each Vacation Care period.

_____

_____

Medication forms, and Asthma and Allergy Management plans can be obtained from the Kidszone Office. This must be completed for each child with a diagnosed medical condition.

Any allergies of which we need to be made aware? _____

Have you filled out a photo permission form indicating your consent for photos or videos to be taken of your child/ren? Yes ☐ No ☐

Behaviour Agreement

If your child breaks the Kidszone rules — including intentional harm to others, swearing, destruction of property, or behaviour deemed unsafe — you will be required to collect your child from the service.

Do you acknowledge and agree to this?

Yes ☐ No ☐

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Bookings

Please tick the days and circle the session time your child/ren require care for below. Please note booked days are recurring from week to week over a school holiday period unless approved by Centre Director. For cancelations, please give a minimum of 1 weeks' notice.

	Monday	Tuesday	Wednesday	Thursday	Friday
Excursion/Event-Summer	Fairy Floss Cloud Dough	Paint & Popper Sip	Excursion- Gardens Galore $10	Water Play	Tropical Mocktail Creations
Week 1 7th-11th Dec 2026					
Session Time	**9 - 10 - 12**	**9 - 10 - 12**	**9 - 10 - 12**	**9 - 10 - 12**	**9 - 10 - 12**

*Please circle session time on days required- 9hr (8:00-5:00), 10hr (7:30-5:30) & 12hr (6:30-6:30) sessions are available.

Please Note: All excursion money is to be paid prior to the excursion date for children to attend the excursion. Please provide excursion money in the envelopes provided, at the end of the holiday's excursion money will be refunded if needed by admin.

Program Consents

By enrolling in a Kidszone Australia Vacation care Program you consent to your child/ren participating in the following programmed activities at Kidszone Australia.

- Face Painting
- Cooking Activities
- Water Play
- Sensory play
- Watching G and PG movies
- Playing G and PG games

Parent / Carer Signature

By signing below, you consent to all information provided on this form, agree that all information is correct and you accept Kidszone Australia's Policies and Procedures, including fees and collection policy.

First Name _____**Last Name**_____

Signature _____

Date_____

Excursion Permission form

Excursion- Gardens Galore

Where: 21 Albion Street, Warwick QLD 4370

When: Wednesday 9th of December, 9:30-12:30pm.

Activities: Children will take part in a fun activities provided at Gardens Galore, look through the nursery, feed goats, enjoy a milk shake and food.

Cost: $10

Transportation: Walking

Bring: Children must have enclosed shoes, hat and water bottle to attend the excursion.

***Money must be paid in cash to the Kidszone office before the Excursion**

***Children must have enclosed shoes, wide brimmed hat (no caps) and water bottle to participate in excursions**

Please tick the Excursion you give permission for your child/children to attend

Parent / Carer Signature

By signing below, you consent to all information provided on this form, along with the excursion risk assessments. Agree that all information is correct, and you accept Kidszone Australia's Policies and Procedures, including fees and excursion policy.

First Name _____**Last Name**_____

Signature _____**Date**_____

Office Use Only: Date:

Booking has been accepted: YES / NO

Booking has been entered on Hubworks: YES / NO