

Grays Point Activity Centre Inc



Extra-Curricular Activity Permission Form

This permission form meets the relevant regulatory and compliance requirements as outlined in the Education & Care Services National Regulations Part 4.2-Division 6-99 & Part 4.7-Division 1- Subdivision 1-158 & 160.

Child(ren)s name: _____

Activity attending: _____

Please fill out an individual form for each activity as required.

Activity Location/Address: _____

Onsite

Offsite

Name & contact number of person(s) taking to the activity: _____

When will they be absent from the centre? Date starting: _____

One off event Weekly during term 1 2 3 4 Other _____

BEFORE SCHOOL

Mon

Tues

Wed

Thurs

Fri

Absent from: _____ am Returning at: _____ am
 Not returning

AFTER SCHOOL

Mon

Tues

Wed

Thurs

Fri

Absent from: _____ pm Returning at: _____ pm
 Not returning

Parent/Guardian Permission

- I accept that GPAC educators are happy to remind my child(ren) to attend the extra curricular activity but will no be held responsible if my child does not go when reminded.
- I accept that my child(ren) attending and travelling to and from activities during an OOSH session may not be under the supervision of the GPAC staff if ratio cannot be met or if offsite (soccer etc).
- I understand that GPAC staff are not responsible for my child whilst they are absent from the OOSH centre.
- I accept that if I collect my child directly from the extra curricular activity when they would usually return to GPAC I need to notify the centre that they will not be returning and sign them out.

Name Parent/Guardian _____

Signature _____ Date: _____

Office use only:

Date received:

Received By:

Other:

Date records updated:

Updated by: