## **Loftus Recreation Centre Holiday Program**

Child's First Name: Child's Last Name:							
BELOW MUST BE COMPLETED IN FULL							
Male/Female Age: Date of Birth:							
Parent Name: Mobile Phone:							
Email:							
Emergency Contact Name: Relationship to Child:							
Contact Number: Childs Medical Conditions							
Pack water, lunch, snacks and please ensure your child has sunscreen and a hat where necessary.							
PLEASE CIRCLE THE CLASS(ES) YOU WISH TO ENROL YOUR CHILD IN.							
	MON 28 SEP	TUES 29 SEPT	WED 30 SEPT	THURS 1 OCT	FRI 2 OCT		
Morning	PUBLIC	Soccer	Soccer	Soccer	Soccer		
9.00am – 12.30pm	HOLIDAY	→ Clinic	Clinic	→ Clinic	Clinic		
Afternoon	PUBLIC	Space	Cupcake	Outside Fun	Dance Party		
12.30pm – 3.00pm	HOLIDAY	Invaders	Creations*	o acorde i an	Daniel Larry		
	MON 5 OCT	TUE 6 OCT	WED 7 OCT	THU 8 OCT	FRI 9 OCT		
Morning	Basketball	Basketball	Basketball	Basketball	Basketball		
9.00am – 12.30pm	Clinic 🛧	Clinic	→ Clinic	Clinic	Clinic		
<b>Afternoon</b> 12.30pm – 3.00pm	Art Attack	Science Kids	Pirate Day	Colourful	Wrap Up		
12.30pm 3.00pm		$\bigstar$	Filate Day	Cooking*	Party 🜟		
→ Want to be child may be p	photographed for ight then please ore information	We will be taking or future Loftus Ad let us know on th	g a few photos on dvertising, if you'd se day and we wil se Loftus Programs	Cooking* the days that are d prefer they'd sta I ensure to keep t s Manager on (08	starred. Your ay out of the hem out of all		
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## Disclaimer and Emergency First Aid

By enrolling my child in the Loftus Recreation Centre Junior Holidays Programs
I agree to the following conditions:

- 1. In the event of an accident or illness suffered by my child, the organizers of the Loftus Recreation Centre Junior Activities Program are authorized to obtain, on my behalf, such medical assistance as my child may require, and I agree to reimburse the organizers for any expense incurred.
- 2. Although all care will be taken, Loftus Recreation Centre staff and program leaders are free from all responsibility for accidents or loss of property in connection with any child's participation
- 3. I understand and agree that at all times my child participate at their own risk and I will not hold Belgravia Leisure or its staff liable for any personal injury which may result to my child or loss of property except for any liability by Belgravia Leisure if it fails to render its services with due care and skill or supplies any material in connection with those services which is not reasonably fit for the purpose for which they are supplied
- 4. Any prepaid sessions cannot be refunded as this reserves your child's place in the Program. Credit for future sessions may be granted at management's discretion.
- 5. My child is in my care until their clinic start time and handover is complete with the Coach. Children are not to be left unattended.

## **DECLARATION**

I, the parent of declare that the information understood and	•	
signed	NAME	DATE

