



MUELLER COLLEGE OSHC

Parent / Guardian email: _____

April 2nd - April 15th 2024

WE WILL BE CLOSED 29/03/24-01/04/24

Birds of a feather



Vacation Care Program

FOR OFFICE USE ONLY

DATE & TIME RECEIVED: _____

Please note: All bookings must be made via the booking form. Bookings via email or phone will need to be followed by the form as soon as possible to be fully confirmed.

ESSENTIAL INFO FOR VACATION CARE

Hats

- A hat is to be brought everyday.
- **No sun visors or caps (school hat recommended).**
- No hat, no play in the sun.
- Hats will **not** be borrowed from other children or lost property.

Shoes

- Children are required to have appropriate shoes whilst in care.
- Appropriate shoes are: sneakers with socks / beach sandals.
- **Inappropriate shoes are: clogs / thongs / scuffs.**
- No roller shoes

Clothing

- A red shirt must be worn for all excursions (unless otherwise specified).
- Students should be wearing clothing that is sun safe, covering the tops of the shoulders. Singlets and small strapped dresses should not be worn.

Bag

- A backpack/bag is required for each child to put his/her belongings in.

Food

- Parents are asked to send enough food for morning & afternoon tea and lunch.
- **Please do not send foods that contain NUTS as we have multiple students with severe nut allergies and at high risk of Anaphylaxis.**
- Children are required to have a well balanced lunch.
- Please do not send food in plastic bags.
- Lunches may be refrigerated at Outside School Hours Care but left overs will **not** be re-heated.
- **Please do not send food that requires cooking (e.g. noodles).**
- A reasonable size water bottle is to be sent each day (not in 135ml pop-top bottle).

PLEASE NOTE, NO PHONES, IPADS OR PERSONAL DEVICES ARE TO BE BOUGHT TO VACATION CARE

MEDICATION

Please note that all students attending the Service will need to remain taking any pre-scribed regular medications on the days of attendance. The Service is able to administer any required medications if they:

- Have been given to the OSHC staff in their original packaging with a pharmacy label.
- Are accompanied by the Service medication administration permission form.

The medication request form is available through the link or QR code below:



If you do not want your child participating in the activities listed or to see the nominated movies, please contact our Director, Rachel Rose via email: r.rose@mueller.qld.edu.au, and arrangements will be made for them to do another activity in the OSHC room.

WE WILL BE CLOSED FRIDAY 29th MARCH 24 THROUGH TO MONDAY 1st APRIL 2024. WE WILL OPEN ON MONDAY 15th APRIL FOR VACATION CARE FROM 6AM.

VACATION CARE FEES 2024

Hours :

6:00 am – 6:00 pm.

Sessions:

12hr session 6:00 am – 6:00 pm

10hr session 6:30am – 4:30pm

10hr session 7:30am – 5:30pm

LATE FEES : Late collection of children after 6:00pm will incur a fee of \$1 per minute.

CASUAL BOOKINGS = \$89.00/session

CASUAL BOOKING CANCELLATIONS:

MORE THAN 2 WORKING DAYS PRIOR : No charge

WITHIN THE 2 WORKING DAYS PRIOR : \$15 charge (No subsidy)

ON THE DAY : Full fees processed as normal

A casual booking cancellations should be made **in writing** via OSHCadmin@mueller.qld.edu.au

PERMANENT BOOKINGS = \$84.00/session (please indicate on page 4 of this document)

PERMANENT BOOKING CANCELLATIONS:

Once form submitted all sessions indicated will be charged.

Permanent bookings will not be accepted after Monday 25/03/24

It is the responsibility of the parent/guardian to communicate with Centrelink with relation to the number of allowable absences available without affecting subsidies.

For full cancellation terms please read the [Mueller College OSHC Fee and Cancellation policy](#)

VACATION CARE BOOKINGS:

Vacation care programs will be released four weeks before each vacation period. Paper and PDF copies of the program will remain available for families as required and will be available from the OSHC Room and the Early Learning Centre. Bookings are essential. Please book early to ensure the availability of places on the days you require.

Please note: All bookings must be made via one of the booking form formats. Bookings via email or phone will need to be followed by the form as soon as possible to be fully confirmed.

For enquiries call OSHC: 3897 2754

Bookings will only be accepted for students attending Mueller College in prep-yr 9 and will require additional enrolment to the Service in order for this form to be processed. For OSHC enrolments use the QR code here:



PAYMENT OF FEES:

The preferred method of payment of fees is by direct debit from your bank account or direct deposit using the account information on your statement. Arrangements for direct debits can be made by requesting a debit set up form at the OSHC or via email. Fees can also be paid by direct deposit using the bank details found on your statement.

Please note that the cost of the activities is included in the daily fee and the child care subsidy will be applied to the total daily fee. If unsure of fee costs please contact the Service on 3897 2754. Outside School Hours Care reserves the right to cancel activities if materials or services are unavailable.

Fees will be charged to accounts 1 week in advance and Statements sent each Monday showing the future weeks fees. Payment of fees should be made the same week that the Statement comes out.

Please note: All absences will be charged as per our policies unless a medical certificate can be provided

VACATION CARE BOOKING FORM-JANUARY 2024

Please return this form to OSHC and complete your 2024 OSHC enrolment by **Monday 25/03/24**

Names of children in the family requiring care :

1.	_____	age _____	D.O.B. _____
2.	_____	age _____	D.O.B. _____
3.	_____	age _____	D.O.B. _____
4.	_____	age _____	D.O.B. _____

If you are wanting to book under the permanent booking fee please indicate here:

When selecting below, you will be charged for all **sessions** indicated.

To cancel this booking, you will need to submit your request in writing with 14 days notice.

At any point you may access additional sessions **at the normal casual rate**. Bookings and cancellations for these additional sessions will follow the fees and terms for casual bookings. For casual booking terms please refer to the Service Fee and Cancellation Policy.

Date	Program	DETAILS	Activity Time	Number of students attending
Mon, 1st April		CLOSED		
Tues, 2nd April	CHICKEN OR EGG	Henny Penny coming to stay		
Wed, 3rd April	ROAD RUNNER	GO KART fun!		
Thurs, 4th April	POLLY WANT A CRACKER	In Rhythm drumming performance	10am	
Fri, 5th April	PEACOCK FEATHER	Come dressed in your favourite outfit or costume!		
Mon, 8th April	EAGLES WING	A day of fun challenges, craft and fun		
Tues, 9th April	DOVE OF PEACE	Silent disco and so much more!	10am	
Wed, 10th April	KOOKABURRA LAUGH	Nature Clay Workshop	10am	
Thurs, 11th April	TINY SPARROW	Watching: Peter Rabbit with popcorn	10am	
Fri, 12th April	MAJESTIC CRANE	Lego kit building fun		
Mon, 15th April	MINE! MINE! MINE!	Ocean themed fun and games		

Please indicate number of students attending here

Informed Consent and Acknowledgement

I give permission for my child / children named above to participate in provided activities for the above dates. The children will be under the coordination of Isaac Russell, Connor Vellnagel & Emma-Lee Benecke. I give my permission for staff to obtain whatever medical attention they deem necessary at my expense.

I confirm:

- The details I have provided above are true and correct
- I have agreed to the session and days of care and the start and end times of these sessions care is provided on a permanent or casual basis as indicated above.
- I am liable to pay fees for my child's care as indicated in the attached information and in line with other information the Service makes available to me (such as a Fee Schedule) which are subject to change over time based on advice from the Provider. This includes all money associated with late fees and cancellations as listed above and in the Service Fee and Cancellation Policy.
- If indicating a permanent booking above, I understand that the sessions I have indicated will be charged to my account unless I provide 14days written notice.
- I am responsible to communicate with Centrelink to fully understand and track my allowable absences for my child care and how this may affect my subsidies.
- My child will continue all regular medications on the days accessing care at the Service. I will ensure that all medications required to be taken at the Service will be available, pharmacy labelled and accompanied by the required medication administration request forms.

Signature of Parent / Guardian : _____

Name of Parent / Guardian : _____

Date : _____/_____/_____