Bridgetown Leisure Centre

September School Holiday Program Enrolment Form

	DRMATION		
SURNAME:			
	Child #1	Child #2	Child #3
First Name:			
Date of Birth:			
Age:			
Name of Parent (Emergency Cor			
Address:			
Email Address:			
Telephone:	M:		
Alternate Emer gency Contact:	Name: Tel:		
MAEDICAL DETAI	16		
MEDICAL DETAI Child's I		Condition	Medication?
			Yes / No

during the program? Yes / No

Do you give permission for your child to be photographed by centre staff whilst participating in the program's activities? Photo's may be used for promotional purposes.

Yes / No

LOCAL EXCURSIONS

I give permission for my child to participate in programmed excursions to different locations within a short walking distance of the Bridgetown Leisure Centre. Excursions may include visits to the library and grassed surrounding areas. Yes / No





WEEK ONE

MONDAY

Public Holiday

TUESDAY

Rec Centre **Morning Fitness STEM Challenges** Dodgeball

> <u>Library</u> Create a **Board Game** Lego

WEDNESDAY

Rec Centre **Morning Fitness Rock Painting** Sport

Library Up close with birds Design a bird Lego

THURSDAY

Rec Centre **Morning Fitness** Cooking -Malteser slice Disco Library

Dream Catchers

Story Writing

FRIDAY

PEMBERTON EXCURSION!

Aerial Adventure **High Ropes** Course

WEEK TWO

MONDAY

Rec Centre **Morning Fitness** Pom Pom Animals **Team Games**

Library Gabriel Evans -Workshop Suncatchers

TUESDAY

Rec Centre Morning Fitness Science **Directive Monster** Illustration Library

Stem Kit -Marshmallow Tower Bookmark Making

WEDNESDAY

Rec Centre **Morning Fitness** Stress balls Sports

Library Paper Mosaics Lego

THURSDAY

Rec Centre Morning Fitness Cooking -Rocky road Police Incursion

Library Scavenger Hunt

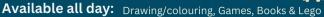
FRIDA

PARTY DAY!

Mikes **Inflatables** &

Movie





	<u>Select Days Required</u>
Child Name:	Age:
Child Name:	Age:
Child Name:	Age:

Sept/Oct 2024	Days Required (please tick)	Price	Total
Monday 23rd	PUBLIC	HOLIDAY	
Tuesday 24th		\$ 35.00	\$
Wednesday 25th		\$ 35.00	\$
Thursday 26th		\$ 35.00	\$
Friday 27th		\$ 45.00	\$
Monday 30th		\$ 35.00	\$
Tuesday 1st		\$ 35.00	\$
Wednesday 2nd		\$ 35.00	\$
Thursday 3rd		\$ 35.00	\$
Friday 4th		\$ 45.00	\$
			\$

I wish to enrol my child in the days indicated above. I am aware the hours of care are from 9am until 3pm. I understand that 24hrs notification period applies to cancellation of the session. Please advise of cancellations by emailing RECREATION@bridgetown.wa.gov.au

In case of accident or untoward incident, I give consent for any necessary Medical Treatment and/or Ambulance Transport and agree to meet any expenses incurred.

I have read & understood the information provided in this form.

Parent/Guardian Name	:
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