

Karratha Family Centre is excited to be offering two drop and go afternoon sessions from 3-5pm for children aged 5-10 years old.

**Construction Tuesday** consists of a variety of hands on activities for children to explore and create using their fine motor skills. It allows for children to work individually or together in teams and interact socially with other children.



**Arts and crafts Thursday** consists of a variety of engaging art/craft activities set up each week. Children will have the opportunity to complete a guided activity with the facilitator or to engage in other activities independently or in small groups.



**What to bring:**

- Water bottle
- Hat
- Snacks (no nuts please)

## Afternoon Program Registration Form

### CHILD 1

Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Address: \_\_\_\_\_ Male/Female: \_\_\_\_\_

### CHILD 2

Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Address: \_\_\_\_\_ Male/Female: \_\_\_\_\_

### CHILD 3

Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Address: \_\_\_\_\_ Male/Female: \_\_\_\_\_

### PARENT/GUARDIAN

Full Name: \_\_\_\_\_

Home Address: \_\_\_\_\_

Mobile Phone: \_\_\_\_\_ Email: \_\_\_\_\_

### EMERGENCY CONTACT

Full Name: \_\_\_\_\_

Relationship to Child: \_\_\_\_\_ Mobile phone: \_\_\_\_\_

Home Address: \_\_\_\_\_

*I do / do not give permission for the above person to collect my child from Karratha Family Centre.*

### MEDICAL INFORMATION:

Does your child have any allergies? Yes / No

If so, please describe: \_\_\_\_\_

Does your child suffer from asthma or any other health concerns? Yes / No

If so, please describe \_\_\_\_\_

Does your child have any special needs which you would like us to be aware of? (eg cultural, religious, disabilities, dietary etc) Yes / No

If so please provide more information:

\_\_\_\_\_

\_\_\_\_\_

## PERMISSIONS

Please tick yes or no to specify your approved/denied permissions;

		YES	NO
Photos of your child	To be used within the Centre		
	To be used outside the Centre		
	To be posted in private SR Facebook group <i>(these groups will only consist of parents of children attending the same day for communication purposes only)</i>		
	To be used on our website and social media <i>( Facebook / Instagram / promotional emails)</i>		
Transport	For your child to be transported in a motor vehicle should the emergency need arise?		
Health & safety	To apply sunscreen to your child where needed		
	To apply insect repellent to your child where needed		

I understand that if my child/ren become disruptive or endanger the safety of other children, I will be contacted for **immediate collection**.

If you have any Family Arrangements, needs, and/or concerns please arrange to speak to us privately.

I confirm that all details provided are true and correct, and I understand that The Karratha Family Centre are not liable for injury or incidents which may occur during the program sessions.

## PARENT / GUARDIAN

Name : \_\_\_\_\_ (Please Print )    Signature : \_\_\_\_\_    Date : \_\_/\_\_/\_\_

**PLEASE NOTE** : All information provided in this enrolment form is confidential.

**PLEASE NOTE** : All information provided in this registration form is confidential.