**Extra-Curricular Activity Permission Form**

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| **Child’s Name:** |
| Activity | Location | Day of Activity | Duration | Date Start | Date End | Time Start | Time End | Parent to Collect |
| Permanent | Once Only | Yes | No |
|       |       |       | [ ]  | [ ]  |       |       |       |       | [ ]  | [ ]  |
| **Child’s Name:** |
| Activity | Location | Day of Activity | Duration | Date Start | Date End | Time Start | Time End | Parent to Collect |
| Permanent | Once Only | Yes | No |
|       |       |       | [ ]  | [ ]  |       |       |       |       | [ ]  | [ ]  |

**Authorisation:**

I, (parent / guardian’s name),       give permission for my above child/ren to attend the above activity on the state times. I understand Albany Hills Outside School Hours Care will endeavour to escort my child/ren to the activity however at times may be unable to due so due to ratio requirements. I am aware of this and authorise my child/ren to leave the service unattended and walk from the service to the activity. I understand that if an activity finishes at 8:30am or 6:00pm that my child will be responsible for walking themselves in the morning or to designated meeting area with parent in the evening as the service closes at 6pm.

**Parent:**

**Signature:**

**Date:**