



**SCHOOL HOLIDAY ACTIVITIES PERMISSION SLIP**

**PARTICIPANT DETAILS**

Name/s: \_\_\_\_\_ Age(s): \_\_\_\_\_

Date: \_\_\_\_\_ Amount: \_\_\_\_\_ (Note: This amount is non-refundable)

Medical Form Lodged &/or Updated: Y/N (NB: Each participant must have a current medical form lodged if there are any changes since the lodgement of their last medical form with Shire Wide Youth Services Menai office)

**PARENT/GUARDIAN PERMISSION**

As a parent/guardian I understand that while participating in this program, my child will receive reasonable care and attention for their safety. I understand that Shire Wide Youth Service carry no liability for any personal injury. In the event of illness, injury or accident I authorise the obtaining on my behalf of such medical assistance as my child may require, and I agree to meet any attached expenses. The information I have given is true, and if there are any changes I shall notify the Shire Wide Youth Service staff immediately.

Name: \_\_\_\_\_ Signature: \_\_\_\_\_

Parent/Guardian Contact Number/s: \_\_\_\_\_

Other Contact Name and Number: \_\_\_\_\_

**PHOTOGRAPHY WAIVER**

Photographs may be taken during this program to assist in promoting the youth service. Please sign bellow if you give permission for your child/children to be included in individual and group shots.

Name: \_\_\_\_\_ Signature: \_\_\_\_\_

Please tick the Activity you wish to attend below (more than one activity can be ticked).

<input type="checkbox"/> Tweenies 10/1	<input type="checkbox"/> Kurnell Beach 11/1	<input type="checkbox"/> Luna Park 12/1	<input type="checkbox"/> Laser Tag 13/1
<input type="checkbox"/> Tweenies 17/1	<input type="checkbox"/> Botany Pools 18/1	<input type="checkbox"/> Drop-In 19/1	<input type="checkbox"/> Syd Kings 20/1
<input type="checkbox"/> Featherdale 24/1	<input type="checkbox"/> Film @ MYC 25/1	<b>Closed</b>	<input type="checkbox"/> Jamberoo 27/1

NB: If one or more of the Activities ticked are already full, the participant will be placed on a waiting list in order of when the forms were submitted.