

Child's First Name: \_\_\_\_\_ Child's Last Name: \_\_\_\_\_

BELOW MUST BE COMPLETED IN FULL

Male/Female Age: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Parent Name: \_\_\_\_\_ Mobile Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Emergency Contact Name: \_\_\_\_\_ Relationship to Child: \_\_\_\_\_

Contact Number: \_\_\_\_\_ Childs Medical Conditions \_\_\_\_\_

Pack water, lunch, snacks and please ensure your child has sunscreen and a hat where necessary.

**PLEASE CIRCLE THE CLASS(ES) YOU WISH TO ENROL YOUR CHILD IN.**

WEEK 1	MON 4 JAN	TUES 5 JAN	WED 6 JAN	THURS 7 JAN	FRI 8 JAN
<b>Morning</b> 9.00am – 12.30pm	Basketball Clinic	Basketball ★ Clinic	Basketball Clinic	Basketball Clinic	Basketball Clinic
<b>Afternoon</b> 12.30pm – 3.00pm	Game Day ★	Space Invaders	Cupcake Creations* ★	Outside Fun	Dance Party
WEEK 2	MON 11 JAN	TUE 12 JAN	WED 13 JAN	THU 14 JAN	FRI 15 JAN
<b>Morning</b> 9.00am – 12.30pm	Soccer Clinic	Soccer ★ Clinic	Soccer ★ Clinic	Soccer Clinic	Soccer Clinic
<b>Afternoon</b> 12.30pm – 3.00pm	Art Attack	Science Kids ★	Pirate Day	Colourful Creations* ★	Friday Party ★
WEEK 3	MON 18 JAN	TUES 19 JAN	WED 20 JAN	THURS 21 JAN	FRI 22 JAN
<b>Morning</b> 9.00am – 12.30pm	Basketball ★ Clinic	Basketball Clinic	Basketball Clinic ★	Basketball Clinic	Basketball Clinic
<b>Afternoon</b> 12.30pm – 3.00pm	Pirate Day	Pancake Party* ★	Game Day ★	Groovy Creations ★	Dance Party
WEEK 4	MON 25 JAN	TUE 26 JAN	WED 27 JAN	THU 28 JAN	FRI 29 JAN
<b>Morning</b> 9.00am – 12.30pm	Soccer Clinic ★	PUBLIC HOLIDAY	Soccer ★ Clinic	Soccer Clinic	Soccer Clinic
<b>Afternoon</b> 12.30pm – 3.00pm	Aussie Party* ★	PUBLIC HOLIDAY	Cupcake Creations*	Summer Fun ★	Wrap Up Party ★

★ Want to be Loftus Famous? We will be taking a few photos on the days that are starred. Your child may be photographed for future Loftus Advertising, if you'd prefer they'd stay out of the paparazzi limelight then please let us know on the day and we will ensure to keep them out of all pictures. For more information please contact the Loftus Programs Manager on (08) 9227 6526 or [loftusprograms@belgravialeisure.com.au](mailto:loftusprograms@belgravialeisure.com.au)

*- \*Please note food handling classes may not be suitable for children with Allergies.  
- All clinics and classes require a minimum of 5 enrolments to run. Completed enrolment form and payment secures your child's place in program.  
- Parents/Guardians are responsible for signing in their child at reception and dropping child off at program with Programs Coach present. Please do not leave child unattended without staff presence.*

All Classes are **\$25.00** Pre-Paid or **\$30.00** after 30/12/2020

Total Classes : \_\_\_\_\_

Total Cost: \$ \_\_\_\_\_

### **Disclaimer and Emergency First Aid**

By enrolling my child in the Loftus Recreation Centre Junior Holidays Programs I agree to the following conditions:

1. In the event of an accident or illness suffered by my child, the organizers of the Loftus Recreation Centre Junior Activities Program are authorized to obtain, on my behalf, such medical assistance as my child may require, and I agree to reimburse the organizers for any expense incurred.
2. Although all care will be taken, Loftus Recreation Centre staff and program leaders are free from all responsibility for accidents or loss of property in connection with any child's participation
3. I understand and agree that at all times my child participate at their own risk and I will not hold Belgravia Leisure or its staff liable for any personal injury which may result to my child or loss of property except for any liability by Belgravia Leisure if it fails to render its services with due care and skill or supplies any material in connection with those services which is not reasonably fit for the purpose for which they are supplied
4. Any prepaid sessions cannot be refunded as this reserves your child's place in the Program. Credit for future sessions may be granted at management's discretion.
5. My child is in my care until their clinic start time and handover is complete with the Coach. Children are not to be left unattended.

#### **DECLARATION**

I, the parent of \_\_\_\_\_ (Please write child's name) declare that the information above is complete and accurate, and I have read, understood and agree to the conditions outlined above

SIGNED \_\_\_\_\_ NAME \_\_\_\_\_ DATE \_\_\_\_\_