

CLARENCE YOUTH SERVICE



SOUTH ARM SKATE PARK!

Young people **MUST** bring protective gear, scooter / board, hat, sunscreen, drink bottle and snacks. BBQ Lunch provided.

SCHOOL HOLIDAY PROGRAM—GRADE 5 and ABOVE

ONLY 20 SPACES!! BOOK NOW!!

Bookings & Enquiries:

0400 720 373 or 0400 610 794



Clarence Youth Service



youthservices@ccc.tas.gov.au

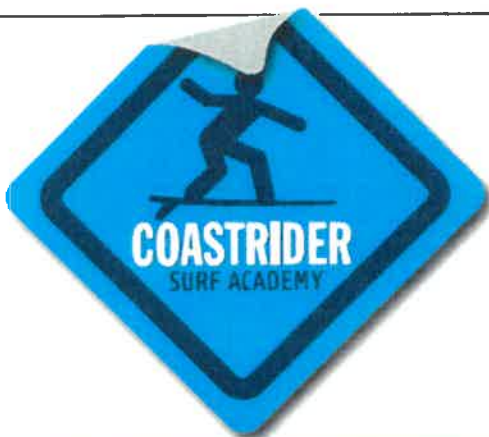
TUESDAY 7TH JANUARY 2020

Transport provided with pickup locations in Rokeby,
Warrane/Mornington & Risdon Vale

**\$10
FOR THE DAY!!**



CLARENCE YOUTH SERVICE



COAST RIDER SURF SCHOOL & PICNIC!

Young people **MUST** bring a hat, sunscreen, bathers, towel, bag (for wet clothes), drink bottle and packed lunch.

TUES 14TH JANUARY 2020

Transport provided with pickup locations in Rokeby, Warrane/Mornington & Risdon Vale

\$10
FOR THE DAY!!

SCHOOL HOLIDAY PROGRAM
—GRADE 5 and ABOVE
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Clarence Youth Service

CLARENCE YOUTH SERVICE



KINGBOROUGH GYMNASTICS CIRCUIT & BEACH WALK

Young people **MUST** bring a hat, sunscreen,
drink bottle and packed lunch.

SCHOOL HOLIDAY PROGRAM—GRADE 5 and ABOVE

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0400 720 373 or 0400 610 794

THURS 16TH JANUARY 2020

Transport provided with pickup locations in Rokeby,
Warrane/Mornington & Risdon Vale.



Clarence Youth Service



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**\$10
FOR THE DAY!!**



CLARENCE YOUTH SERVICE

Zone 3

LASER GAMES



ZONE 3 LASER GAMES & ICECREAM!

Young people MUST bring a hat, sunscreen, drink bottle and packed lunch/



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SCHOOL HOLIDAY PROGRAM—GRADE 5 and ABOVE

ONLY 20 SPACES!! BOOK NOW!!

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0400 610 794

**\$10
FOR THE DAY!!**

TUESDAY 21ST JANUARY 2020



CLARENCE YOUTH SERVICE



BONORONG WILDLIFE PARK TOUR, FEEDING, BBQ LUNCH

Young people **MUST** bring a hat, sunscreen,
drink bottle and snacks

SCHOOL HOLIDAY PROGRAM—GRADE 5 and ABOVE

ONLY 20 SPACES!! BOOK NOW!!

**0400 720 373 or
0400 610 794**

**\$10
FOR THE DAY!!**



THURS 23RD JANUARY 2020

Transport provided with pickup locations in Rokeby,
Warrane/Mornington & Risdon Vale.



Clarence Youth Service



youthservices@ccc.tas.gov.au



BONORONG
Wildlife Sanctuary



School Holiday Program Registration

(PLEASE COMPLETE AND RETURN BY 20TH DECEMBER 2019)

Name _____ Date of Birth _____
Young Person's Name

Address _____

Parent/Guardian Name _____

Email _____

Address _____

Phone (H) _____ (W) _____ (M) _____

Emergency Contact Name _____

Phone (H) _____ (W) _____ (M) _____

| Holiday Program Activity - Please tick which activities you will be attending: | |
|---|-----------------------|
| Tuesday, 7 th January 2020, South Arm Skate and Play. | <input type="radio"/> |
| Thursday, 9 th January 2020, Hobart Convict Penitentiary. | <input type="radio"/> |
| Tuesday, 14 th January 2020, Coast rider Surf School | <input type="radio"/> |
| Thursday, 16 th January 2020, Kingborough Gymnastics Circuit | <input type="radio"/> |
| Tuesday, 21 st January 2020, Zone 3 Laser Games | <input type="radio"/> |
| Thursday, 23 rd January 2020, Bonorong Wildlife Sanctuary | <input type="radio"/> |

Consent to Collection/Access

I consent / do not consent for _____ to leave the Youth Services Holiday Program without a supervisor/parent/guardian.

If someone other than myself is going to collect my young person, I agree to inform the Program Supervisor of the Youth Services Holiday Program each time.

The following people may collect my young person from Youth Services Holiday Program:

Name _____

Name _____

Address _____

Address _____

Phone _____

Phone _____

PTO ▶

Clarence City Council Youth Services

School Holiday Program Registration

Consent to Photography

I consent / do not consent to _____ being photographed and the photographs used for promotional purposes by Clarence City Council.

Medication Consent

I give permission for staff of Clarence Council Youth Service to give _____ his / her medication.

Or: _____ is able to take his / her own medication without the assistance and I do not hold Youth Services responsible if my young person does not take his / her medication, or inappropriately takes his / her medication.

Other Requirements or Important Information

Is there anything we need to be aware of in order for your young person to participate in the program?

Yes / No

If yes, what are the requirements _____

Is there any other important information that we need to be aware of, e.g. allergies?

Yes / No

If yes, provide details _____

Would you like the Centre Coordinator to call you about this information?

Yes / No

Please list any activities your young person is not to be included in

Activity

Reason the young person cannot participate

Care and Safety Conditions

- In the event of the emergency contact being unavailable, I agree to let the Youth Services staff take my young person to the nearest medical centre and I will be responsible for any medical expenses incurred.
- I give my consent for Youth Services staff to discuss any medical matters concerning my young person's health
- I will not hold the Clarence City Council liable for any costs, actions, demands or for any damage caused in respect of any injury to, or death of any person or loss or damage to any property arising out of or in connection with this agreement. I also agree that I will indemnify and will keep indemnified the Clarence City Council against all such costs, actions, claims, demands and damage

Parent Signature _____ Date _____



Return to: Clarence Council Youth Service, 6 Grange Road, Rokeby 7019
Or email: Leah Clark, lclark@ccc.tas.gov.au 0400 720 373