



## INFORMATION / CONDITIONS

**VENUE:** Adventure Zone operates from **Mandurah Primary School**, Hackett Street Mandurah 6210.

### **BEFORE SCHOOL CARE**

**Breakfast is provided for children attending.** Parents must accompany their children into the centre and sign their child in. Your child will be delivered to their school prior to the start of school.

### **AFTER SCHOOL CARE**

Your child will be **picked up from their school after the bell** and driven to our centre. **Afternoon tea** is available for the children to enjoy before relaxing or participating in some of the fun, organised daily activities. "Home work help sessions" run by our staff are also available. **Parents can pick up their children up to 6pm.** A late fee of \$2 per minute will be charged for after 6pm.

### **MEDICATION**

If children require medication, prescribed by a doctor written authorization must be given to the Supervisor, together with the medication in the original bottle and all relevant details.

### **CANCELLATIONS**

If your child is unable to attend for any reason, it is important that you contact the Manager at the centre. This is to prevent staff searching for children unnecessarily and delaying collecting children from the next school. A no-show fee of \$10 will be charged if parents fail to notify us of a child's non-attendance. **Unfortunately no refunds for cancellations will be given.** 2 weeks notice is required to cancel a booking.

### **HOW TO ENROL**

Enrolment and payments can be made;

**In Person:** During Centre hours Mandurah Primary School

**By Mail:** Post form to **Adventure Zone**. PO Box 3035 Mandurah Forum 6210.

**By email:** Send to [enrol@adventurezone.com.au](mailto:enrol@adventurezone.com.au)

### **Please Note:**

Mail and E-mail Bookings are not confirmed until receipt has been issued.

### **Child Care Benefit Fee Relief**

**All parents are eligible for fee relief through the FAO. Please call on 136150 to get your CRN numbers. We require CRN's for children and parents to offer CCB. Also you can claim back 50% of what you pay Adventure Zone, this is your 50% out of pocket expense rebate.**

**Bookings are only confirmed with payment.**

**FEES:** (Child Care Benefit Fee Relief Available)

**Before School Care: \$25 per child per day**

**After School Care: \$34 per child per day**

**Early Close 2:50: \$36 per child per day**

**Early Close Thursday: \$38 per child per day**

**Late payment of account \$10 per week**

**Casual bookings incur a \$5 fee per session.**

**Fees must be paid a fortnight in advance for bookings to be confirmed.**

### **PARENT DECLARATION:**

\* I wish to enrol my children in the **Adventure Zone** O.S.H.C. as outlined in this enrolment form.

I understand that **Adventure Zone**, it's staff and management will take all reasonable care of my children and I will not hold them responsible for any damage and/ or loss of property and/ or accident. In case of accidental or untoward incident I give my consent for any necessary medical treatment and agree to meet any expenses incurred. I realise that I am responsible for informing **Adventure Zone** staff of any medical conditions that may affect my children's participation in the program.

\* I hereby give permission for my child(ren) to be transported between their school and the Outside School Hours Care Centre, including transport by private vehicle should the need arise.

\* I recognise that **Adventure Zone** reserves the right to remove a child from the program for any action by the child that may distract or hinder the program. This will include any threatening action, inappropriate language, or any behaviour deemed disruptive by the Program Supervisor and **Adventure Zone** Manager.

\* To control the risk of cross infection my child will not be admitted to the program with any infectious disease/medical condition. A doctor's clearance may be required before my child will be re-admitted to the program.

**I have read, understood and accept all of the above information and conditions.**

**Parent/Guardian signature:.....**

**Date: ...../...../.....**



**BEFORE AND AFTER SCHOOL CARE  
Vacation care annual form**

**Before School care 6:30 AM- 9:00AM**

**After School care 2:30 PM – 6:00 PM**

**ADVENTURE ZONE OUT OF SCHOOL  
HOURS CARE CENTRE IS LOCATED AT**

**Mandurah Primary School**

**18 Hackett Street**

**Mandurah**

**Mob: 0410 537 127**

**Email us: [enrol@adventurezone.com.au](mailto:enrol@adventurezone.com.au)**

**Details for direct online payment**

**BSB# 302-162 Account# 0500274**

.....  
**Adventure Zone is a Government Approved  
Child Care Provider**

**CHILD CARE BENEFIT APPROVED CENTRE**

Call the **Family Assistance Office on 136150** to discuss your Child Care Benefit entitlement.