**GREENSLOPES SS OUTSIDE SCHOOL CARE – EXTRA CURRICULAR ACTIVITIES PERMISSION FORM**

****

***SWIMMING PAULA MCGUIRE - 0418989509***

**I give permission for my child** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**to leave the care of**

**Greenslopes SS Outside School Care in order to participate in the extra-curricular activity Swimming at the school swimming pool under the following conditions:**

* My child will go by themselves to and from the swimming activity.

(One OSCA educator who is supervising the oval in the afternoon, assists and monitors child movement to and from the pool)

* I have reminded my child that an educator will sign them out and instruct them to go to participate in the swimming activity and that they are to follow any directions given by an OSCA educator.
* Your child will be taken to the pool 10 minutes before swimming starts and will be monitored to come back to OSCA 10-15 minutes after swimming is finished.
* I will collect my child from the activity when the activity finishes: (please circle) YES NO

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Day** | **Period/Dates of Activity**  **Start date Finish date** | | **Activity child will be**  **participating in** | **Timeframe**  **Start Finish** | |
| MONDAY |  |  | Swimming lessons |  |  |
| TUESDAY |  |  |  |  |
| WEDNESDAY |  |  |  |  |
| THURSDAY |  |  |  |  |
| FRIDAY |  |  |  |  |

* I have reminded my child to ensure that they do not leave the service until their name is marked off by an educator.
* I understand whilst away from the service participating in this activity, **my child will not be under the care of Greenslopes SS Outside School Care Association.**
* I understand that responsibility for my child will once again be that of the service once my child is back from the activity and returns to the service.
* I understand that I will still be charged for the time that my child is away from the service participating in extra-curricular activities.
* I will undertake to ensure that I notify the service if and when this arrangement changes.
* **In case I collect my child from the activity, I will come to the service and let the staff know.**
* **I will notify the service if a swimming lesson is cancelled.**
* **STORM EVACUATIONS -** In case of receiving a warning from the Bureau of Meteorology about storm weather approaching Greenslopes area, we are obliged to conduct our Storm Evacuation procedure. All children will be moved to OSCA indoor areas and **it may include collection of children from the pool before swimming is finished**. This is because the child's arrival back to OSCA during the storm is risky and may not be possible.

Parent/Guardian signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Co-ordinator’s signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_