

Brooklyn Community Holiday Programme

Please be sure to remember to provide the following for your child/ren every day:

- A refillable, named drink bottle, as it is important that children remain hydrated.
- Lunch
- Shoes or sandals, no jandals please. (If wearing jandals, child will be asked to remain inside the premises).
- Sunhats in summer
- Skateboards, scooters etc. are welcome if accompanied with the right protective gear eg. helmet. We take no responsibility for loss or damage to these items brought to the Programme.
- Afternoon tea is not provided but we are happy to prepare a simple afternoon tea brought from home eg. 2 minute noodles, toast etc.

Brooklyn Holiday Programme is a fully inclusive programme and is delivered free from any discrimination, coercion, harassment, sexual, financial, or other exploitation. We welcome a diverse range of families and children and respect all our clients' ethnic, cultural, and spiritual values and beliefs.

The safety and welfare of your child/ren is of prime importance to us. For this reason we will not release your child/ren to anyone not named on your child's enrolment form, unless we receive prior verbal or written permission from you. If you require your child to walk home unaccompanied, please complete a consent form available from the Childcare office, and detail the route home on the back of the form. We reserve the right to refuse this on any given day should we believe it is not safe or suitable for your child to leave the centre.

Children must be collected by the time shown on their enrolment form, or you can call the Childcare office on 385 0089 to change to a later session time. You will be invoiced the difference in fees from the earlier to the later pick-up time. Non-notification may result in additional charges. Email: childcare@brooklyncommunitycentre.org.nz

Email: cinicare or booklyncommunity centresorg.nz

Please advise us if your child/ren have a **medical condition, health issue, disability or a special requirement including behavioural challenges**. Should one-on-one care be required for your child/ren, we will do our best to arrange someone. Extra staffing costs will be passed onto you. This will need to be arranged prior to your child/ren starting with the Holiday Programme. We may require more information so that we can provide the best care for your child/ren while they are with us. <u>All matters will be dealt with confidentially and in-line with the **Privacy Act 2020**.</u>

Any **medication** your child is required to take must be handed to the Childcare Manager or Senior Supervisor upon arrival at the centre. To comply with regulations, we require you to **complete a Medication Consent Form** indicating what the medication is, how and when to administer it, and your signature. We cannot administer medication without this documentation and your child is not permitted to hold their own medication, with the exception of asthma inhalers. In the event of injury or illness to your child, you will be advised as soon as possible. If the circumstances require immediate medical attention we will arrange this. Any costs incurred will be charged to you for reimbursement.

Brooklyn Holiday Programme will **not** be held responsible for the loss or damage of any valuable items such as cell phones, iPods etc.

We are looking forward to having your child on our Programme. As a parent you are part of this experience so if you have any questions please do not hesitate to ask. We welcome your concerns, comments, and feedback. For any complaints regarding the programme, programme staff, or any other issues concerning the programme, please email the BCA Community Centre Manager at: manager@brooklyncommunitycentre.org.nz

Brooklyn Community Association



Holiday Programme Payment Options

Thank you for enrolling your child/ren in our Holiday Programme.

All Holiday Programme enrolments are payable upon confirmation of your booking.

Payments can be made by:

Direct Credit or Automatic Payment to: Brooklyn Community Association, Westpac Bank Account number: 03 0510 0732375 01

Please include your child's name and surname and/or your invoice number.

Cash is accepted but you must provide the exact amount due with no arrears. It is your responsibility to ask for a receipt if paying by cash. Receipt should be kept for two years in case of any discrepancies.

WINZ subsidy or equivalent: You must apply for your subsidy as soon as possible prior to the beginning of the Holiday Programme. WINZ must send proof of your application prior to the starting date of the Holiday Programme. If no confirmation is received prior to the start of the Programme, you will have to pay prior to your child attending the programme. A refund will be given as soon as we receive payment from WINZ. If you haven't got confirmation of your first payment one week after you have made it, please do contact us to ensure your child remains on the programme.

Prior to registering your child into the programme, if you have any problems with the above you should contact the Childcare Manager who will pass on your query to the appropriate person.

Thank you and we'll see you there.

Brooklyn Community Association

Email: childcare@brooklyncommunitycentre.org.nz



Brooklyn Community Association Holiday Programme

Child's Given Name:		Surname:
Child's Given Name:		Surname:
Child's Given Name:		Surname:
PARENTS/CAREGIVERS:		
1. Surname:	Given Name:	Relationship:
Address		
Home:	Work:	Mobile:
Email		
2. Surname:	Given Name:	Relationship:
Address		
Home:	Work:	Mobile:
Email		
1. Surname:	Work:	Mobile: Relationship:
Other people authorised to col	lect your child/ren:	
People not authorised to collec	t your child/ren:	
MEDICAL CONDITIONS: Please lis	t any medical conditions that your child/ren	n has (e.g. epilepsy, asthma, allergies etc.).
Medical Practice (G.P.):		Ph:
DIETARY/SPECIAL REQUIREMEN	TS: Please list any specific dietary require	ements that your child/ren require.



Brooklyn Community Association Holiday Programme Sept/Oct 2024

Date	e:	Amount 1	paid:	Receipt#:			Invoice#:			Staff signature:	
				(Above section-	for	office	use only)				
		Child's Name							100		
		Child's Name.	·						Age:		
		Child's Name:	·						Age:		
Dlagga in di	inata (al) w	uhiah dan/a na	un abild/	man ana attandina	~~	d oin	cle the daily costs	1	iah a	unnly to your	
riease inai	caie (V) n	vnich aay/s yo	ur cnua/i	ren are anenaing	an	a cir	cie ine aany cosis	wn	ucn a	ppiy to you:	
√ D :	ay/Date	The	me			D	aily Cost			No.	Daily
										Attending	Total
						3pr	<u>n</u>	<u>6</u> 1	<u>om</u>		
	ıy 30 th Sep		Pjs and			31			41		\$
	ay 01st Oc		Laser Fo		\$				53		\$
O Wedne	esday 02 nd	October		rs & Collectors		31			41		\$
	lay 03 rd O 04 th Octo		Flicks	10.6.	\$			\$	53		\$ \$
o Friday	04 th Octo	ber	Arts and	i Crafts		31			41		•
	y 07 th Oc		Games 1	Day	\$	31		\$	41		\$
	ay 08 th Oc		Flicks		\$	41		\$	53		\$
	esday 09 th		Lola's I		\$	31			41		\$
	lay 10 th O		Laser Fo		\$	41			53		\$
	11 th Octo		Party Da	•	\$	31		\$	41		\$
I give my	permissi	on for my chi	ld to tra	vel by Bus					-	Γotal due	\$
Yes 🔲 1	No 🔲 (T	ick the one appli	cable).				_				
						_	_				
Pa	yment wi	ll be made by:	Intern	et WINZ Sub	sidy	y L	Other arrangem	ent.			
							ting in our Holiday Pro				
							be reached. By signing v. Please request a Me				
							eimbursed by the par				
I give cons	ent for my	child/ren's pl	hotos to b	e taken/used in re	lati	ion w	with the Brooklyn	Hol	iday	Programme eg. fu	iture
				(Tick the one a					•		
The program	me will ens	ure confidentiali	tv and will	comply at all times y	vith	the r	equirements of the Pi	rivac	ev Act	2020.	
				<u>-</u> -,					.,		
							ns of my child/ren atter payment of the associa				
							notify the programme				
Receipt to be	made to: (S	Surname)					(Given name)				
Caregiver 1.				Caregiver 2.						Date: / /	
Curceron 1.											



CONSENT FORM

FOR <u>ARRIVING</u> and <u>LEAVING</u> THE HOLIDAY PROGRAMME AND/OR BEFORE/ AFTER SCHOOL CARE PROGRAMME UNACCOMPANIED BY A PARENT/CAREGIVER

I give permission t	for:		
	(Child's first name)	(Child's surname)	
To arrive/ leave the Bef	Fore/After School Care	or the School Holiday Programme t	from:
Time:::	_		
Once my child has beer	n signed out by the Chil- Centre Association staff	childcare Supervisor will sign my clud care Manager/Childcare Supervisor members and committee are no loss my responsibility.	or, the
My child is aware of ho	w to make their way to	and from the Brooklyn Community	y
Centre (please outline to case nobody is home as		s form) and has a contingency plan	n in
Surname:	Given Name:		
Parent/Caregiver Signature:		Date:	