

OSHC Vacation Care

Holiday Program Term 4 2015

We are a fully approved child care provider!



New Programs

Incursions, sports, arts & crafts, games

Kelly Club OSHC St Bernadette's Vacation Care is a fully approved child care provider at St Bernadette's P.S.

The end of the year is fast approaching, we have a great range of activities for our December Holiday Program. We have the favourite sports based activities, arts, crafts and games.

WHEN

Thursday 18th, Friday 19th
Monday 21st, Tuesday 22nd and
Wednesday 23rd December

WHERE

St Bernadette's Primary School
53 Stanley Street Ivanhoe

WHAT TO BRING

Children to bring their own packed lunch,
snacks and drink bottle

TIME

7:30am till 6:00pm

COST

\$55-\$75 per day before rebate

REBATE

We are child, youth and family approved

Most families are eligible to claim Child Care Benefit (CCB) and the 50% Child Care Tax Rebate (CCTR)

NO AGE LIMIT

ACTIVITY PROGRAM

Week 1

Monday 15th	NA	Tuesday 16th	NA	Wednesday 17th	NA	Thursday 18th	\$55	Friday 19th	\$55
						Cricket		Mixed Sports	
						Netball		Soccer	
						Arts & Crafts		Basketball	
						Novelty Races/ Party Games		Athletics	
								Painting	

Week 2

Monday 21st	\$60	Tuesday 22nd	\$65	Wednesday 23rd	\$55	Thursday 24th	NA	Friday 25th	NA
Dancing		Baking/Cooking		Hockey					
Cricket		Basketball		Cricket					
Football		Arts & Crafts		Arts/Crafts					
Parachute		Ball Games		Netball					
Christmas Decorations		Quiz		Party Games					

(these are a guideline & may change from day to day depending on the children that enrol, their likes and the weather)

TO ENROL

Existing: kellysports.com.au (Go to OSHC Vacation Care - St Bernadette's P.S.)

Email this form to sbivanhoe@kellycluboshc.com.au

New: Email sbivanhoe@kellycluboshc.com.au for enrolment forms

ST BERNADETTE'S PRIMARY SCHOOL

sbivanhoe@kellycluboshc.com.au

Enrolment Form

OSHC Vacation Care

Holiday Program Term 4 2015



Timetable

Please indicate which days you would like to enrol your child(ren)

Week 1

Monday	Tuesday	Wednesday	Thursday	Friday

Week 2

Monday	Tuesday	Wednesday	Thursday	Friday

Details

Parent/Guardian (as per your CCB registration, Primary Parent)

Name: _____ D.O.B: _____ CRN: _____

Child 01

Name: _____ D.O.B: _____ CRN: _____

Child 02

Name: _____ D.O.B: _____ CRN: _____

Child 03

Name: _____ D.O.B: _____ CRN: _____

Contact Information

Phone: _____ Email: _____

TO ENROL

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