

## H2O Xtream Holiday Programme Booking Form

**Child's Name:** \_\_\_\_\_

**DOB:** \_\_\_\_\_ **Age During Programme:** \_\_\_\_\_ **Gender:** \_\_\_\_\_

**Programme:** Surf's Up (5-8yrs)  **Hang10 (9-13yrs)**

	9/1	10/1	11/1	12/1	13/1	16/1	17/1	18/1	19/1	20/1	24/1	25/1	26/1	27/1
DAY														
AM														
PM														

**Parent/Caregiver Name:** \_\_\_\_\_

**Relationship to child:** \_\_\_\_\_

**Email:** \_\_\_\_\_

**Work Phone:** \_\_\_\_\_

**Mobile Phone:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**First Emergency Contact Name:** \_\_\_\_\_

**Relationship to child:** \_\_\_\_\_

**Email:** \_\_\_\_\_

**Work Phone:** \_\_\_\_\_

**Mobile Phone:** \_\_\_\_\_

**Second Emergency Contact Name:** \_\_\_\_\_

**Relationship to child:** \_\_\_\_\_

**Email:** \_\_\_\_\_

**Work Phone:** \_\_\_\_\_

**Mobile Phone:** \_\_\_\_\_

**Pick Up Authorisation (additional people authorized):**

**Names:** \_\_\_\_\_

### Medical Information:

If your child has medical requirements, please complete a supplementary medical information form.

My child has medical requirements.

I have completed the medical form.

### Permission & Consent:

I have read and agree to the terms & conditions.

I give permission for a first aid trained staff member to administer first aid and seek emergency treatment if necessary.

I give consent for my child to participate in the H2O Holiday Programme activities.

I give permission for my child to be included in photography while participating in the holiday programme.

I give Upper Hutt City Council permission to use images of my child & I understand that images may be used in publications and promotional material.

I give permission for my child to leave the programme unsupervised and make their own way home at \_\_\_\_\_pm

**Signed:** \_\_\_\_\_ **Date:** \_\_\_\_\_

### Payment:

Total Amount: \$ \_\_\_\_\_

Payment Type: WINZ \_\_\_\_\_ Invoice \_\_\_\_\_ Eftpos/Credit \_\_\_\_\_ Cash \_\_\_\_\_

Payment via invoice to be paid by **5pm 4th January**. Email h2oholidays@uhcc.govt.nz

#### Office Use Only:

**Booking** \_\_\_\_\_ **Payment** \_\_\_\_\_ **WINZ to Pay** \_\_\_\_\_ **Invoice** \_\_\_\_\_

**Amount \$** \_\_\_\_\_ **Staff** \_\_\_\_\_ **Date** \_\_\_\_\_

**Details Checked** \_\_\_\_\_ **Staff** \_\_\_\_\_ **Date** \_\_\_\_\_