



Albany Hills Outside School Hours Care

Keong Road, Albany Creek 4035

Ph 3325 3204

## Self-Presenting Child Permission Form

I \_\_\_\_\_ (parent/guardian name) of \_\_\_\_\_

\_\_\_\_\_ (address) authorise employees of Albany Hills State School Outside School Hours Care program to sign my child in and out of the program.

My child \_\_\_\_\_ attends \_\_\_\_\_ (school name).

My child will be enrolled at the program for the following care (please tick which care is applicable):

- Before School Care:** *My child will be required to be signed out of Before School Care by an employee of Albany Hills Outside School Hours Care and walk themselves to school.*
- After School Care:** *My child will be required to be signed into After School Care by an employee of Albany Hills Outside School Hours Care after self-presenting from school.*

I am aware and understand that until \_\_\_\_\_ (child's name) arrives at the Outside School Hours Care program and is signed in by an employee that my child is responsible for themselves.

I am aware and understand that once my child \_\_\_\_\_ (child's name) is signed out of the Outside School Hours Care program in the morning and released to walk to school that my child is responsible for themselves.

I am aware and understand that \_\_\_\_\_ (child's name) is required to carry a working mobile phone at all times on their person during times of transit in cases where they may be running late and they will notify either the service or parent of the situation. The parent must notify the service immediately of any changes to care or changes in arrivals or departures.

I will provide the service with the contact number for \_\_\_\_\_ (child's name) mobile and notify the service of any changes. Mobile number \_\_\_\_\_.

I authorise my child \_\_\_\_\_ to be signed out of the service in the morning at the time of \_\_\_\_\_ am to walk to school. I anticipate that my child will self-present to the service at the estimated time of \_\_\_\_\_ pm. After this time I give authorisation for an employee of the service to contact my child if they have not arrived at the service to confirm they are on their way to the program.

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SIGNATURE & SUBMISSION by PARENT/GUARDIAN

**Electronic SIGNATURE of Parent/Guardian\***

Title: \_\_\_ First \_\_\_\_\_ Last: \_\_\_\_\_

Date: \_\_\_ / \_\_\_ / \_\_\_

Coordinators Signature: \_\_\_\_\_