



Participation in After School Activity Form

Name of Child: _____

Class: _____

Delta Gymnastics	Date		Timings
Date Commencing Activity		Start Time of Class	
End Date of Activity		Class Days	

GC Ballet / Dance	Date		Timings
Date Commencing Activity		Start Time of Class	
End Date of Activity		Class Days	

St Hilda's Swimming Lessons	Date		Timings
Date Commencing Activity		Start Time of Class	
End Date of Activity		Class Days	

Pure Tennis Lessons	Date		Timings
Date Commencing Activity		Start Time of Class	
End Date of Activity		Class Days	

My Fit Kids	Date		Timings
Date Commencing Activity		Start Time of Class	
End Date of Activity		Class Days	

	Date		Timings
Date Commencing Activity		Start Time of Class	
End Date of Activity		Class Days	

	Date		Timings
Date Commencing Activity		Start Time of Class	
End Date of Activity		Class Days	

I Hereby give permission for St Hilda's Pre-Preparatory Educators to sign out my daughter from the Pre- Preparatory Centre and hand her over to the responsible coaches of the above activity/ activities. (Risk Assessment available in Pre-Preparatory Centre)

I understand that following this handover, the coach/coaches will be responsible for the care of my daughter and I acknowledge my responsibility for communicating in writing to the Pre-Preparatory Centre staff of any changes to these arrangements.

Parent's Name: _____

Parent's Signature: _____

Date: _____

