

HOLIDAY PROGRAMME BOOKING FORM

MONDAY 12 JULY – FRIDAY 23 JULY



Queenstown Events Centre, Joe O'Connell Drive, Frankton
T 03 450 9005 | E kids@qldc.govt.nz

 qldc.govt.nz/recreation

CHILD'S DETAILS

Child's name: _____

Age: _____ DOB: _____ Sex: M F

Address: _____

Postcode: _____

Any medical conditions, allergies or behavioural difficulties?

If so, please describe management techniques.

Ethnicity: NZ European Māori
 Pacific peoples Chinese
 Other (please specify): _____ Indian

PARENT/CAREGIVER'S DETAILS

Parent/caregiver's name: _____

Mobile: _____ Secondary phone: _____

Email: _____

ALTERNATIVE EMERGENCY DETAILS

Name: _____

Relationship to child: _____

Mobile: _____ Secondary phone: _____

TERMS AND CONDITIONS

- I hereby acknowledge the terms and conditions at sportrec.qldc.govt.nz/kids
- I will supply my child with lunch, drinks, a hat and warm clothes every day they attend the Holiday Programme
- My child will always be signed into and out of the Holiday Programme
- I understand that my child may be photographed for QLDC marketing purposes
- I understand that there are risks associated with my children attending the Holiday Programme. To help minimise these risks, the Holiday Programme has safety procedures, as well as rules and boundaries for all children that must be complied with
- I understand that my children will travel via GoBus Transport on 'away' days
- QLDC is not responsible for loss or damage to children's possessions.

SIGNATURE

Parent/caregiver: _____ Date: _____

WORK AND INCOME SUBSIDIES

Is this a Work and Income (WINZ) application? YES NO

We are an Oscar accredited programme so families can apply for the Oscar subsidy through WINZ. We encourage applications as it can significantly reduce the cost of the Holiday Programme for eligible families. For more information on WINZ subsidies visit www.workandincome.govt.nz or phone 0800 559 009. **WINZ applications will be accepted up until Thursday 8 July and must be made directly with Alexa.** Please return your completed WINZ application form and Holiday Programme booking form to our Customer Services team, or scan and email the forms directly to alexa.peters@qldc.govt.nz. Alexa will contact you when your forms are ready to collect.

	Juniors	Seniors	Late Session
Monday 12 July	\$38 <input type="checkbox"/>	\$38 <input type="checkbox"/>	\$10 <input type="checkbox"/>
Tuesday 13 July	\$38 <input type="checkbox"/>	\$40 <input type="checkbox"/>	\$10 <input type="checkbox"/>
Wednesday 14 July	\$40 <input type="checkbox"/>	\$38 <input type="checkbox"/>	\$10 <input type="checkbox"/>
Thursday 15 July	\$45 <input type="checkbox"/>	\$45 <input type="checkbox"/>	\$10 <input type="checkbox"/>
Friday 16 July	\$45 <input type="checkbox"/>	\$45 <input type="checkbox"/>	\$10 <input type="checkbox"/>
Monday 19 July	\$38 <input type="checkbox"/>	\$45 <input type="checkbox"/>	\$10 <input type="checkbox"/>
Tuesday 20 July	\$45 <input type="checkbox"/>	\$38 <input type="checkbox"/>	\$10 <input type="checkbox"/>
Wednesday 21 July	\$38 <input type="checkbox"/>	\$38 <input type="checkbox"/>	\$10 <input type="checkbox"/>
Thursday 22 July	\$45 <input type="checkbox"/>	\$38 <input type="checkbox"/>	\$10 <input type="checkbox"/>
Friday 23 July	\$38 <input type="checkbox"/>	\$45 <input type="checkbox"/>	\$10 <input type="checkbox"/>

TOTAL: \$ _____

PAYMENT/CREDIT CARD DETAILS

Type of card: Visa Mastercard Expiry Date: _____ / _____

Name of card holder: _____

Credit card number: _____

Signed: _____ Date: _____ / _____

Please return this booking form in person to Customer Services at Queenstown Events Centre, or scan each side of this booking form and email to kids@qldc.govt.nz