

## Permission for a child to arrive or leave the service unattended

To be completed by a parent or guardian when a child will arrive or leave the service unattended by a parent/guardian or authorized collector

Child details									
Child's First Name		Last Name	2	Date of Birth					
		] [							
Details of unattended arrival or departure									
Before school session(s) when my child will leave the service unattended:									
Mon	Tues	Wed	Thurs	Fri					
After school sessio	n(s) when my child to	arrive at the s	ervice unattended:						
Mon	Tues	Wed	Thurs	Fri					
Date Effective:									
Date Lifective.									
Reason for arriving/leaving unattended:									
Address child will be coming from or leaving to:									
Address clind will be colling from or leaving to.									
What time will he/she arrive at or leave the Centre?									
Basis on which this	s will occur:								
Dasis on which this	wiii occur.	-							
One off event:		Date:							
Weekly event:	Date this will o	ommence:			Ī				
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Date this arrangem	nent will cease (if know	/n):							



## **Parent/Guardian Permission**

I accept that Tanderra OOSH staff are happy to remind my child to attend the extra-curricular activity but will not be held responsible if my child does not go when reminded

I understand that my child will not be under the supervision of Tanderra OOSH staff while attending and while travelling to and from activities detailed in this form

I understand that Tanderra OOSH staff are not responsible for my child whilst they are absent from the OOSH centre.

Name of parent/guardian:		
Signature:	Date:	