

After School Activity Authorisation

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|--|--------------|-------------|
| Child's Name | | |
| Activity | | |
| Day | | |
| Time (Please note the latest drop off/pick up time is 4.30pm) | KK Drop off: | KK Pick up: |
| Activity Address | | |

I give permission for my child:

To be delivered and/or collected from the After School Activity stated above by an Educator from Kimberley Kids Early Learning Centre. I understand there will be maximum 11 children and/or 2 adults on the bus at any time, and that each child will be wearing a seatbelt or in a safety restraint according to their age.

I understand that transport is provided by Kimberley Kids Bus or Car.

Parent Signature: _____

Date: _____

Office Use Only

| | |
|--------------------|--|
| Date Received | |
| Added to Timetable | |
| Staff Initials | |