

# APRIL HOLIDAY MAYHEM ACTIVITIES

APRIL 2018

**the youth shed**

<b>MON 16<sup>TH</sup> APRIL</b>	<b>DROP IN &amp; CHILL OUT   KING OF THE COURT</b>	11AM - 4PM
<b>TUES 17<sup>TH</sup> APRIL</b>	<b>MS. TAYLOR'S TRIPPY TIE DYE   POOL TOURNAMENT</b>	11AM - 4PM
<b>WED 18<sup>TH</sup> APRIL</b>	<b>WICKHAM DAY OUT   BBQ LUNCH PROVIDED</b>	10AM - 4PM
<b>THURS 19<sup>TH</sup> APRIL</b>	<b>DROP IN &amp; CHILL OUT</b> 11AM - 4PM   <b>AERIAL ANGELS WORKSHOPS</b> 11AM - 12PM	11AM - 2PM 12PM - 3PM
<b>FRI 20<sup>TH</sup> APRIL</b>	<b>DROP IN</b> 11AM - 3PM   <b>AERIAL ANGELS WORKSHOPS</b> 11AM - 12PM	2PM - 3PM   <b>BLOCK PARTY</b> 6PM - 9PM
<b>MON 23<sup>RD</sup> APRIL</b>	<b>MOVIES, MILKSHAKES &amp; MEGA GAMING</b> 11AM - 4PM   <b>LASER TAG</b> SESSIONS AT 6PM, 6:30PM, 7PM, 7:30PM & 8PM. \$10 PER SESSION. SOCKS MUST BE WORN.	6PM - 8:30PM
<b>TUES 24<sup>TH</sup> APRIL</b>	<b>BEACH DAY AT HEARSONS COVE   BBQ PROVIDED</b>	10AM - 4PM
<b>WED 25<sup>TH</sup> APRIL</b>	<b>CLOSED   ANZAC DAY PUBLIC HOLIDAY</b>	
<b>THURS 26<sup>TH</sup> APRIL</b>	<b>K.U.L.C.H.A   KEEPING A UNITED LOVE FOR CULTURE HELPS US ALL</b>	11AM - 4PM
<b>FRI 27<sup>TH</sup> APRIL</b>	<b>KEWL PEWL PARTY @ KLP   MEET US THERE</b>   AQUA RUN, BBQ LUNCH, POOL GAMES	11AM - 4PM

All events are for youth aged between 11-18 years. Registrations essential to all activities, to register or for more information contact Anna Savill on 0439 778 434 or email [anna.savill@karratha.wa.gov.au](mailto:anna.savill@karratha.wa.gov.au). Outside of the workshop hours The Youth Shed will be closed. All activities are free unless stated otherwise.

PRESENTED BY



WITH SUPPORT FROM

North West Shelf Project



**DISABILITY ACCESS**  
DRUG AND ALCOHOL  
FREE EVENT.



**@KCITYTEENS**  
FOLLOW US ON INSTAGRAM  
FOR THE LATEST EVENTS!

**Return completed form to The Youth Shed:**

In person: Hillview Road, Pegs Creek

Email: [anna.savill@karratha.wa.gov.au](mailto:anna.savill@karratha.wa.gov.au)

## WHAT TO BRING

**Please ensure your Son/Daughter's is wearing appropriate attire (particularly footwear) for planned activities.**

### EACH DAY

- Must wear enclosed shoes**
- Drink bottle
- Healthy snack for morning or afternoon tea. NO NUTS!
- Hat and Sunscreen

## BEHAVIOURAL POLICY

Our goal is to provide activities suitable for youth aged between 11-18 years of all backgrounds and abilities, whilst providing:

- A safe and engaging environment.
- A variety of fun and exciting activities.
- Effective supervision for the duration of the activities.
- Enforcing a behaviour management system based on positive reinforcement, ample warnings for negative behaviour and acknowledgement of achievement.

The **THREE STRIKE WARNING SYSTEM** is acknowledged and enforced by Youth Services staff across all programs and activities.

1. **First Warning:** The young person is verbally made aware of their inappropriate behaviour and why it is not appropriate.
2. **Second Warning:** The young person is verbally informed about their continuing behaviour and removed from the group.
3. **Third Warning:** If the young person continues to demonstrate inappropriate behaviour, Youth Services staff will contact their Parent/Guardian for immediate collection.

### Strikes:

- A third warning represents one strike. Additional strikes will be recorded for the duration of the school holiday activities. Three strikes on separate activity days will result in expulsion for remaining school holiday activities.
- If a strike is given to a young person, this will be immediately communicated to the parent or carer. As expulsion is the last resort, program staff will meet with the parent or carer of a child who has received one or more strikes to discuss a resolution. Should an expulsion occur, careful consideration will be taken when accepting the child in future activities and term programs.

APPLICANT INFORMATION				
	Participant #1	Participant #2	Participant #3	Participant #4
Surname:				
First Name:				
Date of Birth:				
Age:				
Gender:				
Name of Parent/Guardian:				
Postal Address:				
Email Address:				
Telephone:	H:	W:	M:	
<b>This must be filled out</b> <b>Emergency Contact:</b> Or same as above <input type="checkbox"/>	Name:		Relation:	
	H:	W:	M:	
MEDICAL DETAILS				
<p>Please indicate any medical and/or behavioural conditions that your Son/Daughter currently have or have had.</p> <p><b>**Please ensure a Medication Administration form is completed IN FULL when registering you Son/Daughter and a copy of their Medical Action Plan form is attached where required**</b></p>				
Participant's Name	Condition		Medication	
			<input type="checkbox"/> Yes <input type="checkbox"/> No	
			<input type="checkbox"/> Yes <input type="checkbox"/> No	
			<input type="checkbox"/> Yes <input type="checkbox"/> No	
			<input type="checkbox"/> Yes <input type="checkbox"/> No	
MEDIA CONSENT				
<p>I give permission for photographs and video footage of my Son/Daughter to be used in Council and Sponsors promotional material including website, Facebook, Instagram publications and media releases.</p>				
Participant # 1	Participant #2	Participant #3	Participant #4	
<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Parent/Guardian Name:				
Signature:				Date:

## ACTIVITY SELECTION

Please indicate which sessions you would like your Son/Daughter to be booked into.

	Participant #1	Participant #2	Participant #3	Participant #4
Monday 16 <sup>th</sup> April	<input type="checkbox"/> 11am-4pm	<input type="checkbox"/> 11am-4pm	<input type="checkbox"/> 11am-4pm	11am-4pm
Tuesday 17 <sup>th</sup> April	<input type="checkbox"/> 11am-4pm	<input type="checkbox"/> 11am-4pm	<input type="checkbox"/> 11am-4pm	<input type="checkbox"/> 11am-4pm
Wednesday 18 <sup>th</sup> April	<input type="checkbox"/> 10am-4pm	<input type="checkbox"/> 10am-4pm	<input type="checkbox"/> 10am-4pm	<input type="checkbox"/> 10am-4pm
Thursday 19 <sup>th</sup> April	<input type="checkbox"/> 11am-4pm <b>Aerial Angels</b> <input type="checkbox"/> 11am-12pm <input type="checkbox"/> 2pm-3pm	<input type="checkbox"/> 11am-4pm <b>Aerial Angels</b> <input type="checkbox"/> 11am-12pm <input type="checkbox"/> 2pm-3pm	<input type="checkbox"/> 11am-4pm <b>Aerial Angels</b> <input type="checkbox"/> 11am-12pm <input type="checkbox"/> 2pm-3pm	<input type="checkbox"/> 11am-4pm <b>Aerial Angels</b> <input type="checkbox"/> 11am-12pm <input type="checkbox"/> 2pm-3pm
Friday 20 <sup>th</sup> April	<input type="checkbox"/> 11am-4pm <b>Aerial Angels</b> <input type="checkbox"/> 11am-12pm <input type="checkbox"/> 2pm-3pm	<input type="checkbox"/> 11am-4pm <b>Aerial Angels</b> <input type="checkbox"/> 11am-12pm <input type="checkbox"/> 2pm-3pm	<input type="checkbox"/> 11am-4pm <b>Aerial Angels</b> <input type="checkbox"/> 11am-12pm <input type="checkbox"/> 2pm-3pm	<input type="checkbox"/> 11am-4pm <b>Aerial Angels</b> <input type="checkbox"/> 11am-12pm <input type="checkbox"/> 2pm-3pm
Monday 23 <sup>rd</sup> April	<input type="checkbox"/> 11am-5pm	<input type="checkbox"/> 11am-5pm	<input type="checkbox"/> 11am-5pm	<input type="checkbox"/> 11am-5pm
<b>Laser Tag</b> <b>Please ensure</b> <b>enclosed socks</b> <b>are worn for this</b> <b>activity</b> <b>\$10 Per Person,</b> <b>each Session.</b> <b>Cash Only.</b>	<input type="checkbox"/> 6:30pm-7pm <input type="checkbox"/> 7pm-7:30pm <input type="checkbox"/> 7:30pm-8pm	<input type="checkbox"/> 6:30pm-7pm <input type="checkbox"/> 7pm-7:30pm <input type="checkbox"/> 7:30pm-8pm	<input type="checkbox"/> 6:30pm-7pm <input type="checkbox"/> 7pm-7:30pm <input type="checkbox"/> 7:30pm-8pm	<input type="checkbox"/> 6:30pm-7pm <input type="checkbox"/> 7pm-7:30pm <input type="checkbox"/> 7:30pm-8pm
Tuesday 24 <sup>th</sup> April	<input type="checkbox"/> 10am-4pm	<input type="checkbox"/> 10am-4pm	<input type="checkbox"/> 10am-4pm	<input type="checkbox"/> 10am-4pm
Closed for Anzac Day				
Thursday 26 <sup>th</sup> April	<input type="checkbox"/> 10am-5.30pm	10am-5.30pm	10am-5.30pm	10am-5.30pm
Friday 27 <sup>th</sup> April	<input type="checkbox"/> 11am-5pm	<input type="checkbox"/> 11am-5pm	<input type="checkbox"/> 11am-5pm	<input type="checkbox"/> 11am-5pm

### BUS PERMISSION

Do you give your Son/Daughter permission to travel on the bus under the supervision of Youth Services staff members?

Participant # 1	Participant #2	Participant #3	Participant #4
<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No

Parent/Guardian Name:

Signature:

Date:

### TERMS AND CONDITIONS

Your cooperation in complying with the following conditions will assist us in providing safe and enjoyable Holiday Mayhem activities for your Son/Daughter.

#### 1. MEDICATION

If your Son/Daughter requires medication whilst attending the school holiday activities, these must be given to a member of staff to be kept in the Youth Service first aid kit, and the procedures for administering must be followed. Under no circumstances must a participant keep medication in their bags or lunchboxes or administer them themselves.

A medication permission form will need to be filled out and signed by the parent/guardian. These are available from The Youth Shed.

#### 2. YOUNG PERSON'S PARTICIPATION

If your Son/Daughter is unwell or unable to participate in The Youth Shed Holiday Mayhem activities, please keep them at home and advise a staff member.

### DECLARATION

I confirm that I have read, understood and agree to the information provided pertaining to my Son/Daughter's participation in The Youth Shed Holiday Mayhem activities. I have disclosed all relevant information regarding physical, mental or other health conditions which could be aggravated, worsened or impacted by physical exercise or participation in activities by my Son/Daughter.

I have read and agree to The City of Karratha Youth Services Behaviour Policy.

The City of Karratha accepts no responsibility for loss or damage to any items or belongings whilst on the premises or engaging in the activities.

I understand and agree that participants entering The Youth Shed, participating in the Holiday Mayhem Activities and travelling on the provided bus service, acknowledge the owners and operators of City of Karratha Youth Services shall not be liable for any injury to persons and property and forgo any legal rights whatsoever and howsoever incurred, including but not limited to omission act of negligence, default, breach of contract.

Parent/Guardian Name:

Signature:

Date: