HALLOWEEN DISCO AUTHORISATION FORM 2025

PARENT/GUARDIAN PERMISSION

o I understand and accept that HHOOSH educators will remind my child to attend the Halloween Party but will not be held responsible if my child refuses to attend, or if an educator/child misses a reminder.

o I understand and give permission for my child to be signed in and signed out by a staff member so that my child can be released for the Halloween Party as indicated above.

o I understand and accept that HHOOSH is not liable for any injury, illness, or misadventure that my child may encounter whilst at the Halloween Party. HHOOSH's duty of care ends once a child is signed out and starts when the child is signed back in.

o I understand and accept that if I collect my child directly from the Halloween Party when they would usually return to HHOOSH, I need to notify the centre that they will not be returning and ensure that my child is signed out for the day.

o I understand and accept that if I arrange another adult to pick up/deliver my child to/from HHOOSH after the Halloween Party, I must give written permission for this person to sign my child in/out of the HHOOSH roll.

Name of parent/guardian: _____

Signature: _____ Date: _____/_____/____2025____

Halloween Disco Session Times	
Year Group	**Time**
Kindergartes to Years 2	4:00 pm to 5:00 pm
Years 3 to 6	5:15 pm to 6:30 pm

Child's full name:	
DOB:	

Name of activity:	Halloween Disco
Day (of the week):	Thursday the 6th of November 2025
Time (start and finish):	
Location (classroom or address):	HHPS Hall
Will your child return to HHOOSH after the Halloween Party?	