

**SCHOOL HOLIDAY ACTIVITIES**

**For NDIS Participants**

**CLIENT INTAKE FORM**

***Personal Information***

**Full Name: D.O.B**

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| --- | --- |
|  |  |

**Address:**

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|  |

 **City: State: Postcode:**

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| --- | --- | --- |
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**Phone: Email:**

|  |  |
| --- | --- |
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**Food Allergies + Dietary Requirements Relevant Medical History**

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| --- | --- |
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**NDIS Reference Number**

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***Next of Kin Information:***

**Full Name: Relationship:**

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| --- | --- |
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**Phone: Email:**

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***Activities Interested In: (Please choose activities from below)***

**Day(s):**

**Date(s):**

**Time(s):
Activity name(s):**

**Transport Arrangement:**

* Do you want to be picked up and dropped off? YES\_\_\_\_\_\_\_\_\_ NO\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* Do you have your own transport? YES \_\_\_\_\_\_\_\_\_\_ NO\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* Type of your transport\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* Support needed, please describe; \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**APRIL 2023 – SCHOOL HOLIDAY PROGRAM**

**Week 1: April 11-14**

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| --- | --- | --- | --- | --- |
| TIME | **Tuesday 11th** | **Wednesday 12th** | **Thursday 13th**  | **Friday 14th** |
| 9AM-12AM | Easter Egg Hunt  | Cooking Class Pictionary  | Tie Dye T-shirts | Science ExperimentCharades  |
| 1PM-4PM | Leaf Painting | Quiet Reading | Sensory BinColouring In | Scavenger Hunt |

**Week 2:April 17-21**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | **Monday 17th** | **Tuesday 18th** | **Wednesday 19th** | **Thursday 20th**  | **Friday 21st** |
| 9AM-12AM | Paper Airplane Competition | Movie | Cooking class | Science Experiment | Jewellery Making |
| 1PM-4PM | * S Clay Pot Art
 | Face PaintingColouring In | Painting  | Movie | Mother’s day card making  |

**Client’s Full Name Signature Date**

|  |  |  |
| --- | --- | --- |
|  |  |  |

**Please email this form to:** **info@joiningfamilies.org**

**If you have any query regarding this form, please call: 0421 653 673 / 0286053652**