A logo for a fitness company

AI-generated content may be incorrect.

**APRIL SCHOOL HOLIDAY PROGRAM**

**WEEK 1:** MONDAY 14TH APRIL TO THURSDAY 17TH APRIL

**WEEK 2:** TUESDAY 22ND APRIL TO THURSDAY 24TH APRIL



**About**

CounterBalance Fitness offers a School holiday program for children aged 5 to 15 years of age.

The daily program runs from 9am to 3pm through the school holiday period.

Fun activities that the children will be introduced to include some of the following.

**Obstacle Course** (Monkey bars, balance beams and balls, agility running etc

**Boxing for Fitness** (Punch bags, skipping, running & introduction to self-defence) NO CONTACT

**Ball Skills** - Basketball, Netball, Soccer, Cricket, AFL, Shooting Catching and Throwing

**Cardio Zone** - Introduction to Cardiovascular fitness including Rowers, Skiers, Bikes

**Flex n' Stretch -**Allocated time each day to introduce and ensure correct and safe stretching exercises to maintain, improve flexibility, balance and injury prevention.

**School Yard Games** – Farmer Sam, Ultimate Tag, Red light/Green light etc

**Quiet Zone** – Chess, Gigantic Jenga, Connect 4 etc

**Example** of a day in the CounterBalance School Holiday Program:

|  |  |
| --- | --- |
| **Time** | **Agenda** |
| 8.30am – 9.00am | Children Drop Off/ **Parent Sign in** |
| 9.00am -9.30am | Welcome & Warm up |
| 9.30am – 10.30am | **#1** - Boxing for Fitness & Cardio Zone |
| 10.30am – 11.00am | Morning Tea Break |
| 11.00am – 11.45am | **#2** - Obstacle Course |
| 11.45am – 12.30pm | **#3** - Shoot Zone (Ball sports) |
| 12.30pm – 1.30pm | Lunch Break |
| 1.30pm – 2.15pm | **#4** - Game Zone |
| 2.15pm – 3.00pm | **#5** Flex n Stretch (Unwind, Breath and Kids TV program) |
| 3.00pm – 3.10pm | Children Pick up/ **Parent Sign out** |

**Booking Options**

We provide you the choice to either book your child in for a whole week at a special discounted rate OR the flexibility to book your child in for Individual days depending on your varying commitments.

If you have more than one child to book into the CounterBalance School holiday program, we also offer a reduced rate for additional siblings.

Please see and select your preference in the Booking form below.

**Terms and Conditions**

**Illness**

All children who are unwell are to be kept home from the school holiday program. If your child becomes unwell, CounterBalance Fitness will contact you to come and collect your child.

**Child Health and Liability Confirmation**

The parent/ guardian must complete the CounterBalance Fitness Child Health declaration and sign the release of Indemnity/ Liability form prior to your child's enrolment.

**What to Bring**

**\*** Each child to bring bag/ backpack with the following;

**\*** Sweat Towel

**\*** Water Bottle (We have a filtered water refill station)

**\***Hat and Suncream

**\*** Adequate food (Healthy) for Morning tea, Lunch and afternoon tea) **~** Please No food to be supplied with nuts or any nut products to avoid the risk of exposure to other children with allergies. **~**

**CounterBalance Fitness Staff**

All Rostered staff have been specially selected for this school holiday program. We will ensure that ALL activities that your child will experience will be in a fun and supportive environment.

CounterBalance Fitness Staff are all employed with the following qualifications:

First Aid & Resuscitation

Working with Children Card

Relevant Fitness Qualification (Cert IV)

**A black circle with white letters and a logo

AI-generated content may be incorrect.**

**Booking Form**

**Child Details**

|  |  |  |  |
| --- | --- | --- | --- |
|  | **Child #1** | **Child #2** | **Child #3** |
| **Name** |  |  |  |
| **Age & Date of Birth** |  |  |  |
| **List Any Alergies** |  |  |  |
| **Enrolment Days** | | | | |
| **Week 1** | **Whole Week ☐ $350**  **Mon 14th Apr ☐ $95 Day**  **Tues 15th Apr ☐ $95 Day**  **Weds 16th Apr ☐ $95 Day**  **Thurs 17th ☐ $95 Day** | **Whole Week ☐ $300**  **Mon ☐ $85 Day rate**  **Tues ☐ $85 Day rate**  **Weds ☐ $85 Day rate**  **Thurs ☐ $85 Day rate** | **Whole Week ☐ $270**  **Mon ☐ $75 Day rate**  **Tues ☐ $75 Day rate**  **Weds ☐ $75 Day rate**  **Thurs ☐ $75 Day rate** |
| **Week 2** | **Whole Week ☐ $255**  **Tues 22nd Apr ☐ $95 Day**  **Weds 23rd Apr ☐ $95 Day**  **Thurs 24th Apr ☐ $95 Day** | **Whole Week ☐ $205**  **Tues ☐ $85 Day rate**  **Weds ☐ $85 Day rate**  **Thurs ☐ $85 Day rate** | **Whole Week ☐ $175**  **Tues ☐ $75 Day rate**  **Weds ☐ $75 Day rate**  **Thurs ☐ $75 Day rate** |

**Parent/ Guardian Details**

|  |  |  |  |
| --- | --- | --- | --- |
|  | **Name** | **Mobile** | **Email** |
| **Contact 1** |  |  |  |
| **Contact 2** |  |  |  |

Your Information will be safely stored into CounterBalance Fitness software management system Mind Body for future records.

**Payment Details**

**Credit Card**

**CC # \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Expiry \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ CCV\_\_\_\_\_\_\_\_\_\_**

**Name on Card \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

I authorise CounterBalance Fitness to withdrawal the amount of $\_\_\_\_\_\_\_\_\_\_\_\_\_\_ from this credit card.

**Signature …………………………………………………………….. Date ………./………/…………**

**OR**

**Bank Transfer**

**Name – CounterBalance Health**

**BSB – 086 136**

**Account – 94 349 2530**

**Acknowledgement of Risk and Liability Waiver**

You acknowledge and accept the risk inherent in attending CounterBalance Fitness, using fitness equipment and undertaking any exercise program or activity. These risks include personal injury and death. You acknowledge these risks arise not just from your child’s own actions, but the actions, omissions or negligence of others.  
You accept responsibility for your child’s own safety when attending CounterBalance Fitness facilities and participating in any program, activity or using any equipment.

You consent to receive, and authorise CounterBalance Fitness to arrange, medical or hospital treatment which may be deemed advisable in the event of injury, accident, and/or illness to your child when attending the Fitness Centre; and indemnify the organisers for all costs and expenses associated therewith.  
For the avoidance of doubt, you acknowledge that CounterBalance Fitness is not liable for third parties or injury to your child caused by any other member or non-member.  
You hereby agree you will not hold CounterBalance Fitness and/or our employees, agents or volunteers liable for (a) any loss, damage, personal injury or death suffered or incurred from your child’s use of the Fitness Centre or your child’s participation in any class or activity, except if we (or any one of our employees) are deemed negligent; or (b) any loss of/damage to your property, including a vehicle or its contents or property at CounterBalance Fitness.

**PARENTAL CONSENT***(For participants Under 18 years of age)*

By acknowledging and agreeing to this Liability waiver, you give permission as the Parent or legal guardian of the child (under18) to participate in a CounterBalance Fitness session.

You hereby represent that to the best of your knowledge, that your child has no conditions or injuries that may be aggravated by the use of the Fitness Centre or that may affect their ability to participate safely.

**…………………………………………………………………**

**Acknowledgement Signature**

**………………………………………………………………..**

**Name**

**…………/…………/………………**

**Date**

**Please email this Booking Form, Payment remittance and signed Waiver to** [**info@counterbalancefitness.au**](mailto:info@counterbalancefitness.au)