

Tell us about you!

NAME: ----- AGE: -----

When you want time alone
what do you like doing?

What are your
favourite foods?

What are your favourite activities?

Inside:

Outside:

Tell us at least three
things you are good at
doing?

1.

2.

3.

If you went home after
school what would you do?

Is there a special place you would like
to visit?

Holiday spot:

Vacation Care Excursion:

What equipment/toys
would you like to have at
OSHC?