



BOOKING FORM

ONE FORM PER CHILD

Details: Child's Family Name: _____

Child's Christian Name: _____

Class is in LS__

TYPES OF BOOKINGS AVAILABLE

PERMANENT TERM BOOKED CARE:

Bookings will be permanent for the whole term.
No cancellations. Allowable Absences apply.
Casual attendances can be added.

CASUAL BOOKED CARE:

Bookings made at any time during the current term. 48 hours notice is required for Cancellations. Allowable Absences apply.

PLEASE COMPLETE ONLY SECTION A OR B

Section A: PERMANENT TERM BOOKING.

Please Tick

Yes I would like enrol my child for a Permanent Term Booking

Please tick which days your child will attend:

Before School Care Monday Tuesday Wednesday Thursday Friday

After School Care Monday Tuesday Wednesday Thursday Friday

Booking For Term 1 Term 2 Term 3 Term 4

Start Date: _____

Parent Name: _____ Signature: _____ Date: _____

Section B: CASUAL CARE BOOKING

Please Tick

Yes I would like to enrol my child for a casual care booking

I understand I must ring the service (8773 6707) to ensure staff are aware my child will be attending.

Parent Name: _____ Signature: _____ Date: _____

OFFICE USE ONLY:

Enrolment Form and Booking Form Complete and Received by: _____

Signature: _____ Staff name _____
Date Received: ____ / ____ / ____