



BOOKING FORM VACATION CARE

St Catherine's OSHC, Wishart

Please tick the days you require for each child/ren.

Child's Name	DOB	M	T	W	T	F	M	T	W	T	F	M	T	W	T	F	M	T	W	T	F	M	T	W	T	F	M	
		07/12	08/12	09/12	10/12	11/12	14/12	15/12	16/12	17/12	18/12	21/12	22/12	23/12	24/12	—/—	11/01	12/01	13/01	14/01	15/01	18/01	19/01	20/01	21/01	22/01	25/01	
I = Incursion, E = Excursion N = Normal In House day		N	I	N	I	N	N	E	N	N	I	I	N	N	I	X	N	I	I	N	N	N	I	N	E	N	I	
FEES FOR THE WHOLE DAY PER CHILD		\$46	\$71	\$46	\$61	\$46	\$46	\$61	\$46	\$46	\$61	\$61	\$46	\$46	\$61	X	\$46	\$71	\$71	\$46	\$46	\$46	\$61	\$46	\$71	\$46	\$61	

Please note the dates of excursion and incursion days.
EXCURSION PERMISSION FORMS must be completed in order for your child/ren to attend on excursion days.

Parent/carer name:	Mobile phone:
Address:	Work phone:
Suburb/postcode:	Home phone:
Email address:	



PARENT/CARER AGREEMENT

- I/we acknowledge that my child/ren are currently enrolled and have completed Catholic Early EdCare's enrolment forms at

St Catherine's OSHC, Wishart

This information will be made available if your child/ren is/are attending another Catholic Early EdCare Service.

- I/we agree to the terms and conditions relating to bookings, amendments to bookings and the cancellation of bookings as detailed in the Catholic Early EdCare Fees Policy.
- I/we acknowledge that vacation care bookings may be in jeopardy unless accounts are paid up to date.
- I/we agree to pay the schedule fees for the bookings nominated above as per Catholic Early EdCare policy.
- I/we understand that this booking form is due back by Thursday 26 Nov 2020 or my bookings will be charged at a casual rate of **\$51** additional to the fees for the whole day.
Date

Parent/Carer Signature

Date

OFFICE USE ONLY

Date Received:

Received By:

Account Paid:

Term: Yes/No

Vacation Care: Yes/No

Casual Rate: Yes/No

Entered Date: