



Edwardstown Primary School Out of School Hours Care

# Booking Sheet 2020

Child Name/s: \_\_\_\_\_

\_\_\_\_\_

## Permanent Booking

Start Date: \_\_\_\_\_

Please tick the sessions you wish to permanently book for each: week / fortnight

	Monday	Tuesday	Wednesday	Thursday	Friday
Before School Care					
After School Care					

This booking is for the:  **Term** OR  **Year** (excluding Pupil Free Days and Vacation Care)

I \_\_\_\_\_ acknowledge that I need to notify OSHC two weeks prior to any cancelations in regards to permanent bookings, otherwise I will be charged.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Alternatively, are there any irregular, casual sessions required for specific dates?

	Before School Session Dates	After School Session Dates
Monday		
Tuesday		
Wednesday		
Thursday		
Friday		

I \_\_\_\_\_ acknowledge that I am required to provide 48 hours' notice to cancelations in regards to permanent bookings, otherwise I will be charged.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

*In signing I accept and understand that the advance notice for all sessions can only be waived if the parent/caregiver provides a medical certificate for a family member within the same calendar week as the absence to ensure fees can be processed in accordance with Centrelink Child Care Subsidy accounting timelines. If these conditions are not met, families will be charged standard fees.*