

NOTIFICATION OF CHANGES

The completion of the relevant section of this form helps us to respond to your needs for changes to bookings, extra child care, holiday advice and so on.

ENROLLED CHILD/CHILDREN

Child name(s):

Family name:

Room:

Parent's name:

Phone No. 1: Home: Work: Other:

2: Home: Work: Other:

Signature: Date: / /

HOLIDAY ADVICE

I hereby give notice that the above child/children will be away from the Service for the period
 / / to / / (inclusive) and understand that during this period I/we may
 be charged a fee in accordance with Service policy.

OCCASIONAL / EMERGENCY CARE

I request occasional / emergency care for the above child/children on / /

Session: AM PM or times

REQUEST TO CHANGE PERMANENT BOOKING

Please specify your needs, eg. "Extra full days anyday", "Extra full days on Wed.", "Cancel Tues." etc.

Starting: / / for weeks, or until: / / Ongoing (tick)

ADVICE OF CANCELLING ALL BOOKINGS

I request that the Child Care Booking for the above Child/Children be cancelled.
 The last day of care at the Service will be / /
 I understand that 2 weeks notice must be given or payment will be required in lieu of notice.

CHANGE OF DETAILS

Address Phone Collection Other

Details:

OFFICE USE ONLY

Input to booking system Sighted by Director