



VACATION CARE PROGRAM BOOKING FORM

Monday 8th April to Thursday 18th April 2019

Please write the number of places required next to the days you wish to enrol your child/ren in.

WEEK 1	NO. OF CHILDREN	WEEK 2	NO. OF CHILDREN
Monday 8 th April		Monday 15 th April	
Tuesday 9 th April		Tuesday 16 th April	
Wednesday 10 th April		Wednesday 17 th April	
Thursday 11 th April		Thursday 18 th April	
Friday 12 th April		GOOD FRIDAY	Public Holiday

PARENT SURNAME: _____

FAMILY CRN: _____

CHILD 1:

FIRST NAME	SURNAME	CRN

CHILD 2:

FIRST NAME	SURNAME	CRN

CHILD 3:

FIRST NAME	SURNAME	CRN

CHILD 4:

FIRST NAME	SURNAME	CRN

- School Council Policy states that full payment must be made at time of enrolment
- Please ensure you have current % and number of approved hours
- Thongs and bare shoulders are not approved wear at anytime
- During warm weather please pack bathers and a towel for water fun!