

Out of School Hours Care – Request for CASUAL booking

Child's Name: _____

Class:

- | | | | | |
|-----------------------------------|------------------------------------|------------------------------------|-----------------------------------|----------------------------------|
| <input type="checkbox"/> Acacia | <input type="checkbox"/> Banksia | <input type="checkbox"/> Casuarina | <input type="checkbox"/> Dryandra | <input type="checkbox"/> Red Gum |
| <input type="checkbox"/> Ironbark | <input type="checkbox"/> Melaleuca | <input type="checkbox"/> Karri | | |

Parent's Name:

1 _____

2 _____

Contact Numbers:

1 _____ 2 _____

Date of booking/s: _____ Day/s (circle): M T W T F

Please indicate sessions required:

Breakfast Club:

7.30-8.30

Gumnut:

3.00-4.00

3.00-5.30

3.00-6.00

Please tick if you require a room orientation

Please Note:

- Casual bookings should be made by 3.00pm on the day prior to the booking. Places may not be available so please make sure you speak to someone to confirm your booking.
- If pick-ups are not made **within 10 minutes** of your booked pick-up time, you will be charged for the next session.
- Please remember to sign out and **enter the sign out time** or you will be charged for the full session (to 6.00pm).
- Please remember the **service closes at 6.00pm** and children need to be picked up by then. Any pick-ups later than this will be charged a late fee of \$20.00.

Signed: _____ Date: _____

(Parent)