



PLEASE FILL OUT SEPARATE FORMS FOR EACH CHILD

CHILD'S DETAILS:

Child's full name:

Class: _____

BOOKING DETAILS:

BEFORE SCHOOL CARE (PLEASE TICK)

Monday: ☐

Tuesday: ☐

Wednesday: ☐

Thursday: ☐

Friday: ☐

AFTER SCHOOL CARE (PLEASE TICK)

Monday: ☐

Tuesday: ☐

Wednesday 1/2 Day (12:30-2:30): ☐

Wednesday Long Day (12:30-6:00): ☐

Wednesday Normal: ☐

Thursday: ☐

Friday: ☐