



Booking Form OSHC 2025

Please fill out separate forms for each child

CHILD'S DETAILS:

CHILD'S FULL NAME

DOB : _____

MALE: ☐ FEMALE: ☐

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: ☐

UPDATE CHILD INFORMATION:

(Please provide updated 2025 action plans and new medication if needed)

ALLERGIES/INTOLERANCES:

FOOD REQUIREMENTS:

RELIGIOUS/CULTURAL BACKGROUND:

PHOTO PERMISSION:

Do you give permission for your child to have their photo taken for programming purposes?

Yes ☐ No ☐

Do you give permission for photo's of your child to be used for website/facebook posts(On school Facebook Page) and marketing (Parent handbooks, information about programming ect.)?

Yes ☐ No ☐

CRN INFORMATION: (Do not fill out if nothing has changed)

PARENT:

CHILD:

NEWSLETTER/OSHC UPDATE:

EMAIL:

PARENT/GUARDIAN UPDATE (Do not fill out if nothing has changed)
Please add new guardians if you require friends/family to pick up child.

NAME:

EMAIL:

ADDRESS:

NUMBER:

NAME:

EMAIL:

ADDRESS:

NUMBER:

PARENT/GUARDIAN AGREEMENT

NAME:

SIGN
