

Vacation Care Booking Form

24th September to 5th October

PLEASE CIRCLE DAYS REQUIRED:

	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY
Week 1.	Monday 24 th	Tuesday 25 th	WEDNESDAY 25 th	Thursday 26 th ***Incursion	Friday 27 th
Week 2.	Monday 2 nd	TUESDAY 3 rd *** Excursion	Wednesday 4 th	Thursday 5 th	Friday 6 th

CHILD / CHILDREN'S NAME _____

DATE _____

PARENTS NAME _____

SIGNATURE _____

Please Note:

- Booking Forms must be returned to the service no later than **Friday 14th September.**
- All days booked (including excursions) **MUST** be paid for unless **7 DAYS** notice is given in writing.