+ORMOND PRIMARY SCHOOL  
Autumn2023

Holiday Program Booking Form

Family Name: Parent Mobile Number:

Children’s Names:

***Holiday Program Bookings for Casual Families***

***Families*** who don’t attend the Before & After School Care on permanent basis must pay in advance for school holiday bookings. Submit your, booking form to the program or school office **by** **Wednesday 29th March.**

You will receive a text message informing you of the cost based on your childcare subsidy by**Friday 31st March.**

To confirm your booking: payment for casual families must be received by **Wednesday 5th April.2023**

**Holiday Program bookings for permanent Before & After School Care Children.**

**Please present your booking directly to the program** Your Before & After School fees must be paid up to date, based on your most recent account. You will pay the remainder of the Holiday Program fees within 7 days of receiving your account in the second week of term two.

**School Holiday Program Bookings Close** **Wednesday 5th April.2023**

**Please indicate the number of children attending on the day you require care**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Bookings Week One | | | |  | Bookings Week Two | | |
| Date | No Children | | Excursion  Incursion | Date | No Children | Incursion |
| Monday 10th April | Public | | Holiday | Monday 17th April |  |  |
| Tuesday 11th April |  | |  | Tuesday 18th April |  |  |
| Wednesday 12th April |  | | $5.00 | Wednesday 19th April |  | $20.00 |
| Thursday 13th April |  | | $25.00 | Thursday 20th April |  |  |
| Friday 14th April |  | Pay on the day | | Friday 21st April |  |  |
| Total | Deposit | |

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Holiday Program Confirmation Form

Child’s Name: Child’s Name:

Child’s Name: Child’s Name:

To book your child/ren into the school holiday program you must adhere to the booking requirements.

**Bookings will be accepted until booked out or by Wednesday 5th April.2023**

**.**

Please provide the number of children attending in the boxes.

Tues 11th April Wed 12th April Thurs 13th April Fri 14th April

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  |  |  |  |  |  |  |  |  |

Mon 17th April Tues 18th April Wed 19th April Thurs 20th April Fri 21st April Total /Deposit

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  |  |  |  |  |  |  |  |  |

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|  |

**Please complete & return the entire form.**

***Daily Fee: $65.00 per day plus Excursion or Incursion Cost***

***Book Early: Limited spaces are available until the program is booked out.***

**During Session Times Program Phone: 9578 5826**

ORMOND PRIMARY SCHOOL

Autumn Holiday Program 2023

I hereby

give my child/children permission Child’s Name:

Child’s Name: Child’s Name:

to attend the excursion to:  **Dendy Cinema Brighton Friday 14th April 2023**

In case of illness or an accident, when it is impractical to communicate with me or my nominated emergency contacts. I authorise the Coordinator or the person in charge, to consent to my child receiving medical or surgical treatment that is deemed necessary.

Name: Emergency Contact Number:

Signed: Date: