Family Name:						
Children's Names:						
Holiday Program Bookings Families who don't attend th bookings. Submit your, book You will receive a text messa	e Before & A	After School Ca :he program or	school office	by Wednesday 7	th December	<u>•</u>
To confirm your booking, pa	yment for ca	sual families m	nust be receiv	ed by Friday 16th l	December.	
Holiday Program bookings Please present your booking noliday program fees will be School Holiday Program Boo Please indicate the r	directly to the included on kings close <u>V</u>	he program & your BASC acc Vednesday 7 th	pay a 50% de ount. <u>December 20</u>	oosit based on the	e total. The r	remainder of the schoo
	iumber of cr	illaren attendir		ings Week Two		
Bookings Week One Date	Children	Excursion	Date	iligs week i wo	Children	Excursion
Monday 16 th January	Cililaten	EXCUISION	4	day 23 rd January	Cilidien	Excursion
Tuesday 17 th January				day 24 th January		\$20.00
Wednesday 18 th January		\$20.00	Wed	nesday anuary		
Thursday 19 th January			Thurs Janua	sday 26 th ary	Public	Holiday
Friday 20 th January		Pay on the day	Frida	y 27 ^h January		
			Total		Deposit	
Holiday Program Confirma	ntion Form					
Child's Name:		Chil	d's Name:			
Child's Name:						
To book your child/ren into to our Before & After School fo would pay the remainder of two. Bookings	ees must be If the Holiday	paid up to date Program fees	e, based on yo within 7 days	our most recent a	ccount.	the second week of ter
Please provide the number o	of children at	tending in the	boxes.			
Mon 16 th Jan	Tues 17 th Ja	an W	ed 18 th Jan	Thurs 19 th Ja	n] [Fri 20 th Jan
Mon 23 rd Jan	Tues 24 th Ja	an We	ed 25 th Jan	Thurs 26 th Ja Public Holiday	n	Fri 27 th Jan

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.

<u>Summer Holiday Program Excursion - Parent Consent 2023</u>

I hereby	gi	give my child/children permission				
Child's Name:	Child's Name:	Child's Name:				
to attend the excursion to:	Dendy Cinema Brighton F	riday 20th January 2023				
	ordinator or the person in cl	o communicate with me or m harge, to consent to my child	, , ,			
Name:	Emergency	/ Contact Number:				
Cianada	Data					