

# Coffs Harbour Centre

OFFICE PH: 02 6655 2323

Centre PH: 02 6652 5401



## OOSH SERVICES

NOT FOR PROFIT

### After School Care

## After School Care Term 1 Bookings 2012

<b>FAMILY NAME:</b>		CRN
<b>CHILD/REN'S NAMES:</b>	1.	CRN
	2.	CNR
	3.	CNR
	4.	CNR
<b>TELEPHONE:</b>		

#### CHILD IN CARE RATE

Please indicate (✓) how many children from your family will be using childcare that is CCB approved:

1    2    3    4

Please provide your Child Care Percentage (as provided to you by Centrelink):

\_\_\_\_\_ %

**Please book appropriate days for After School Care for Term 1**

WK	DATES	MON	TUES	WED	THUR	FRI
1 1204	January 23 - 29	School Holidays	School Holidays	School Holidays	School Holidays	Pupil Free Day (Check with your school) 27th Jan
2 1205	January 30- February 05	30th Jan	31st Jan	1st Feb	2nd Feb	3rd Feb
3 1206	February 06 – 12	6th Feb	7th Feb	8th Feb	9th Feb	10th Feb
4 1207	February 13 – 19	13th Feb	14th Feb	15th Feb	16th Feb	17th Feb
5 1208	February 20 – 26	20th Feb	21st Feb	22nd Feb	23rd Feb	24th Feb
6 1209	February 27 - March 04	27th Feb	28th Feb	29th Feb	1st Mar	2nd Mar
7 1210	March 05 -11	5th Mar	6th Mar	7th Mar	8th Mar	9th Mar
8 1211	March 12 – 18	12th Mar	13th Mar	14th Mar	15th Mar	16th Mar
9 1212	March 19 – 25	19th Mar	20th Mar	21st Mar	22nd Mar	23rd Mar
10 1213	March 26 – Apr 01	26th Mar	27th Mar	28th Mar	29th Mar	30th Mar
11 1214	April 02 - 05	2nd April	3rd April	4th April	5th April	6th April <b>CLOSED</b>

\* PLEASE NOTE: Session Fee for Booked Care is \$18.00 (see pg 6 of the OAC Parent Book – Fee Policy)

I AGREE TO THE CONDITIONS OF THE FEE POLICY.

\_\_\_\_\_  
Parent/Guardian Name

\_\_\_\_\_  
Signature

\_\_\_\_/\_\_\_\_/\_\_\_\_  
Date

#### TO LODGE THIS BOOKING FORM

MAIL TO:	OR FAX TO:	OR HAND DELIVER TO:
Open Arms Care Inc. Bellingen Children's Centre 1 Elliot Close, BELLINGEN 2454	ASC Bookings 6655 2325	Open Arms Care Inc. Coffs Harbour OOSH Centre Coffs Harbour Public School