

JOHN SEPTIMUS ROE ANGLICAN COMMUNITY SCHOOL

VACATION CARE BOOKING FORM SEPTEMBER/OCTOBER 2024

Child's Full Name	Year	Office Use Only	
		ST KEY	DF KEY
1.			
2.			
3.			
4.			

I/We wish to book my child for the following sessions:

TICK APPROPRIATE COLUMN

Day	Dates	Child 1	Child 2	Child 3	Child 4
Monday	Centre Closed				
Tuesday	24 September 2024				
Wednesday	25 September 2024				
Thursday	26 September 2024				
Friday	27 September 2024				

Day	Dates	Child 1	Child 2	Child 3	Child 4
Monday	30 September 2024				
Tuesday	1 October 2024				
Wednesday	2 October 2024				
Thursday	3 October 2024				
Friday	4 October 2024				

Note:

- Bookings can be made by returning this form to Out of School Care centre or by email to oscb bookings@jsracs.wa.edu.au
- Bookings will be invoiced 2 weeks in arrears.
- Bookings not cancelled 1 week prior to the booking date will be charged.
- Credit Card/Direct Debit details must be provided to the School. Payment for fortnightly accounts as advised will be processed by Credit Card or Direct Debit by the School.
- Payment enquiries to the Accounts office on 9247 2242.

I/We confirm Credit Card/Direct Debit details have been provided (Authority Form enclosed) to the School for Out of School Care Fees.

Yes No

I/We confirm that we have enrolled our child/children in the Out of School Care Programme and that this booking is accepted on the basis of information in this form, the current Fee Schedule and Out of School Care Information Booklet.

Name:	Daytime Contact Number:	
Signed:	Date:	
Office Use: Booking Processed	By:	Date: