

**NOTIFICATION OF CHANGES**

The completion of the relevant section of this form helps us to respond to your needs for changes to bookings, extra child care, holiday advice and so on.

**ENROLLED CHILD/CHILDREN**Child name(s): Family name: Room: Parent's name: Phone No. 1: Home:  
Work:  
Other:2: Home:  
Work:  
Other:Signature: Date:  /  / **HOLIDAY ADVICE**

I hereby give notice that the above child/children will be away from the Service for the period  
 / / to / / (inclusive) and understand that during this period I/we may  
 be charged a fee in accordance with Service policy.

**OCCASIONAL / EMERGENCY CARE**I request occasional / emergency care for the above child/children on  /  / Session: AM  PM  or times **REQUEST TO CHANGE PERMANENT BOOKING**

Please specify your needs, eg. "Extra full days anyday", "Extra full days on Wed.", "Cancel Tues." etc.

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Starting:  /  /  for  weeks, or until:  /  / Ongoing (tick) **ADVICE OF CANCELLING ALL BOOKINGS**

I request that the Child Care Booking for the above Child/Children be cancelled.

The last day of care at the Service will be / /

I understand that 2 weeks notice must be given or payment will be required in lieu of notice.

**CHANGE OF DETAILS**Address Phone Collection Other 

Details:

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OFFICE USE ONLY

Input to booking system Sighted by Director