



FORM O44 Out of School Hours Care Program – Junior School – Term 1, 2016

Permanent Booking Sheet – Before & After School Care

STUDENT NAME:

CLASS:

WEEK 1	Monday 1/2	Tuesday 2/2	Wednesday 3/2	Thursday 4/2	Friday 5/2
Before School Care	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
After School Care	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
WEEK 2	Monday 8/2	Tuesday 9/2	Wednesday 10/2	Thursday 11/2	Friday 12/2
Before School Care	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
After School Care	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
WEEK 3	Monday 15/2	Tuesday 16/2	Wednesday 17/2	Thursday 18/2	Friday 19/2
Before School Care	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
After School Care	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
WEEK 4	Monday 22/2	Tuesday 23/2	Wednesday 24/2	Thursday 25/2	Friday 26/2
Before School Care	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
After School Care	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
WEEK 5	Monday 29/2	Tuesday 1/3	Wednesday 2/3	Thursday 3/3	Friday 4/3
Before School Care	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
After School Care	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
WEEK 6	Monday 7/3	Tuesday 8/3	Wednesday 9/3	Thursday 10/3	Friday 11/3
Before School Care	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
After School Care	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
WEEK 7	Monday 14/3	Tuesday 15/3	Wednesday 16/3	Thursday 17/3	Friday 18/3
Before School Care	PUBLIC	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
After School Care	HOLIDAY	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
WEEK 8	Monday 21/3	Tuesday 22/3	Wednesday 23/3	Thursday 24/3	Friday 25/3
Before School Care	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	PUBLIC
After School Care	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	HOLIDAY
WEEK 9	Monday 28/3	Tuesday 29/3	Wednesday 30/3	Thursday 31/3	Friday 1/4
Before School Care	PUBLIC	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
After School Care	HOLIDAY	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
WEEK 10	Monday 4/4	Tuesday 5/4	Wednesday 6/4	Thursday 7/4	Friday 8/4
Before School Care	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
After School Care	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
WEEK 11	Monday 11/4	Tuesday 12/4	Wednesday 13/4	Thursday 14/4	Friday 15/4
Before School Care	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
After School Care	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

I understand that the above bookings are permanent, and I have a responsibility to advise the Student Services Coordinator prior to 5pm of the previous day should my child no longer require to attend a particular session. I also understand that failing to provide the appropriate cancellation notice will result in my being charged for that session. The Head of Junior School may apply discretion in this policy should extenuating circumstances apply.

Parent Name Parent Signature Date