

Carindale PCYC Vacation Care Booking Form 2010

Ph – 3324 9652 Fax – 3324 9653

Email – manager@carindalepcyc.org.au



To help with our planning and bookings for the year, please complete this form so that we can accommodate your requirements. All Children MUST be current PCYC members for Insurance purposes. (a copy to be given to parent for there record)

Family Name: _____ Family CRN: _____

Contact name: _____ Phone: (H) _____
 Phone: (W) _____ (M) _____ Email: _____

Child 1: Name: _____ CRN _____ DOB _____ PCYC# _____
 Child 2: Name: _____ CRN _____ DOB _____ PCYC# _____
 Child 3 Name: _____ CRN _____ DOB _____ PCYC# _____
 Child 4 Name: _____ CRN _____ DOB _____ PCYC# _____

Easter Holidays Vacation Care – 6th April – 9th April 2010

Monday	Tuesday	Wednesday	Thursday	Friday
5 th April	6 th April	7 th April	8 th April	9 th April
Easter Mon.	1 2 3 4	1 2 3 4	1 2 3 4	1 2 3 4

Please Note - Bookings will not be processed if a previous vac. care bill has not been paid in full.

- **NO REFUNDS - All days booked still need to be paid for irrespective of whether the place is used or not.**
- **A \$2 fee will apply to any booking changes after the booking form has been submitted.**
- **Please ensure your account is paid in full prior to attending (payment is made on the gap fee calculator; therefore shortfalls may occur that are required to be paid prior to the following holiday period).**
- **Please ensure you have provided both a child CRN and a family CRN on the forms provided.**