

Wellers Hill School Age Child Care Service (SACCS)

ALTERATION OF BOOKING DETAILS

ABSENCE **BOOKING** **CANCELLATION**

(Please tick whichever is appropriate)

Ithe undersigned, parent/guardian of

..... (Child/children's name) would like to advise you of the impending absence/booking change/cancellation of my child/children's attendances.

The attendances to be changed are as stated:

Days currently attending:

Absence/Amendments:

The changes are to commence on...../...../.....

Please note:

Approval for booking changes will depend on place availabilities on the days requested.

1 week notice in writing is required for holidays, reducing number of days of care and ceasing/cancellation of care.

IMPORTANT! CCB is not paid for non-attendance on the last/first booked days)

Parent/Guardian signature

.....

Date:/...../.....