



BEFORE AND AFTER SCHOOL CARE BOOKING FORM

Family Name: _____

List children that require Before and/or After School Care:

- 1. _____ Age: _____
- 2. _____ Age: _____
- 3. _____ Age: _____
- 4. _____ Age: _____

Please tick the type of care required: Before School After School
 Full Time Part Time Casual Roster

Any outstanding accounts are required to be paid prior to a booking being made.
 Cancellations to bookings for Before and/or After School Care period should be made giving two (2) weeks notice.

Week 1

Week 2 - if different

Child:	1	2	3	4
Monday				
Tuesday				
Wednesday				
Thursday				
Friday				

1	2	3	4

Parent/Guardian Signature

Date

PRIVACY STATEMENT

The personal information that Council is collecting from you is personal information for the purposes of the Privacy and Personal Information Protection Act 1998. The intended recipients of the personal information are officers within Council; data service providers engaged by the Council from time to time; and any other agent of the Council.

The supply of the information is voluntary. If you cannot provide or do not wish to provide the information sought, Council may be unable to process your application. You may make application for access or amendment to information held by Council. You may also make a request that Council suppresses your personal information from a public register. Council will consider any such application in accordance with the Act. Council is the agency that holds the information.

Enquiries concerning this matter can be addressed to the Public/Privacy Officer.

