

VACATION CARE BOOKING SHEET

April 2024

FAMILY NAME: _____

CHILDREN/S NAME/S: 1) _____ 2) _____
3) _____ 4) _____

CONTACT NAME: _____

CONTACT NUMBER: _____

Monday 15/04/24	Tuesday 16/04/24 Incursion	Wednesday 17/04/24 Excursion	Thursday 18/04/24	Friday 19/04/24 Excursion
Monday 22/04/24	Tuesday 23/04/24 Incursion	Wednesday 24/04/24 Excursion	Thursday 25/04/24	Friday 26/04/24
			<u>Public</u> <u>Holiday</u>	<u>**CLOSED**</u>

I have read the attached "Vacation Care Booking & Cancellation Conditions" and I/we agree to abide by these conditions.

Signed _____ Name _____

Date _____