

Trinity College Gawler River OSHC
 Ph: 8284 6027 - Mobile: 0411 223 184

2012 OSHC BOOKING FORM

Office use only:

Spike Input Date: _____

Name: _____

Signature: _____

Please indicate your required OSHC bookings for 2012 on the table below.

This booking sheet must be accompanied by a 2012 OSHC enrolment form.

Please note: Bookings will only be accepted if all outstanding OSHC fees are paid in full, prior to booking.

We look forward to providing your child/ren with quality care.

Children's Names:

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<u>BSC</u>	<u>Mon</u>	<u>Tues</u>	<u>Wed</u>	<u>Thurs</u>	<u>Fri</u>
Start time:					
End time:					

<u>ASC</u>	<u>Mon</u>	<u>Tues</u>	<u>Wed</u>	<u>Thurs</u>	<u>Fri</u>
Start time:					
End time:					

From: / /2012 **Until:** / /2012

OR

Ongoing: Yes No *(please circle)*

From: / /2012 **Until:** / /2012

OR

Ongoing: Yes No *(please circle)*

Signed: _____ Date: _____