

COMMUNITY OF LEARNERS – CHANGE OF BOOKING NOTIFICATION

ONE FORM PER CHILD

FAMILY NAME:_____ CHILD'S NAME:_____

COL – CONTIONOUS BOOKING (PLEASE TICK)

WEEK COMMENCING _____

	Monday	Tuesday	Wednesday	Thursday	Friday
Week					
Alternate week (If applicable)					

COL - SPECIFIC DATES ONLY BOOKING					
	Monday	Tuesday	Wednesday	Thursday	Friday
Week	/ /	/ /	/ /	/ /	/ /

I understand that:

- Written notification is required at least two weeks in advance. •
- If a position is not available for my child on one of my chosen days, he/she will be placed on a waiting list for that day. •
- The change will be confirmed in the sign-in-book located in COL.
- My child may not attend on these changed days until I see the change in the sign-in-book. •

COL – HOLIDAY NOTIFICATION

Will be on holidays from ____/____ to ____/____ inclusive.

I understand that:

- Written notice of holidays is required at least 2 (two) weeks in advance. Regular fees will apply if notice is late or not given
- ٠ Holidays may only be taken in a 1 (one) week block or more.
- ٠ I will be paying 75% of my regular fees for a maximum of three weeks (per year) and 100% thereafter, in order to keep my child/children's place at the Community of Learners.

COL – TERMINATION NOTIFICATION

Will no longer be requiring care after this date. His/Her last date will be	/	_/	inclusive.
Reason for leaving (Optional):			

I understand that:

- Written notification is required at least two weeks in advance. •
- If less than 2 (two) weeks' notice is given to Holy Spirit School Community of Learners, full fees will apply until the two ٠ weeks is made up.

Parent Name Parent Signature Date

Office Use Only:	Date Received:	Date Entered:	