



YWCA Canberra Turner School Holiday Care Program Booking Form Monday September 25 to Friday October 6, 2023

Please note, this booking form is for families who have already completed a 2023 YWCA Canberra School Age Care enrolment form. Please contact the Childcare Accounts Team if you have not completed a 2023 School Age Care enrolment form so they can issue the relevant full enrolment form for completion.

Location:	Turner Primary School David Street Turner ACT 2612	
Contact:	0420 532 471	
Hours of Operation:	8:00am – 6:00pm Monday to Friday (excluding Public Holidays)	
Availability:	This Service is available for children attending Preschool – Year 6	
Fees and Bookings:	Fee is \$90.00 per day, bookings and payments are required prior to the commencement of School Holiday Care. Fees cover morning and afternoon tea, excursions, and incursions.	
Food:	Please supply lunch and drink bottle each day your child attends. Morning and afternoon tea is provided, and water is always available for the children. Please be aware that due to allergies, the School Holiday Care Program is a Nut Free Zone. Please advise in this form if your child/ren has any specific dietary requirements.	
Child Care Accounts Office Hours and Contact Information		
Hours:	9:00am – 5:00pm Monday to Friday (excluding Public Holidays)	
Contact:	02 6185 2040	
Email:	childcareaccounts@ywca-canberra.org.au	
Website:	YWCA Canberra Children's Service (ywca-canberra.org.au)	
Street and Postal Address:	YWCA Canberra Level 2/71 Northbourne Avenue Canberra ACT 2601	YWCA Canberra GPO Box 767 Canberra ACT 2601

Please note, we cannot process your School Holiday Care booking until the enrolment form is fully complete and all required documentation provided (e.g., up to date medical actions plans and diagnosis/reports)

Child One		
Given Name/s:		
Surname:		
Date of Birth:		
CRN:		
Has there been any change to the health details or medical diagnosis provided in the 2023 School Age Care Enrolment Form:	Yes	No
If yes, please advise of the changes and provide the appropriate medical diagnosis/report:		



Child Two		
Given Name/s:		
Surname:		
Date of Birth:		
CRN:		
Has there been any change to the health details or medical diagnosis provided in the 2023 School Age Care Enrolment Form:	Yes	No
If yes, please advise of the changes and provide the appropriate medical diagnosis/report:		
Child Three		
Given Name/s:		
Surname:		
Date of Birth:		
CRN:		
Has there been any change to the health details or medical diagnosis provided in the 2023 School Age Care Enrolment Form:	Yes	No
If yes, please advise of the changes and provide the appropriate medical diagnosis/report:		
Registered Parent/Guardian 1 Details:		
Given Name/s:		
Surname:		
Contact Number/s:		
Email:		
Address:		
Registered Parent/Guardian 2 Details:		
Given Name/s:		
Surname:		
Contact Number/s:		
Email:		
Address:		
Full name of Registered Parent/Guardian for CCS Purposes:		
CRN of Registered Parent/Guardian for CCS Purposes:		
I/we acknowledge that if there are any changes to the information provided to YWCA Canberra on my account, I am required to notify the Childcare Accounts Team in writing		
I/we acknowledge that this form forms part of my Complying Written Agreement (CWA) with the service under Child Care Subsidy		
I/we acknowledge and confirmation of electronic signature/s below		
Parent/Guardian 1:		
Signature:		
Date:		
Parent/Guardian 2:		
Signature:		
Date:		