



PRINCE ALFRED COLLEGE
Out of School Hours Care

After School Care Permanent Bookings Request Form

Child Name: _____

Class: _____

Weekly Fortnightly

Start Date: ___ / ___ / _____

| Day Required | After School Commitments/Notes |
|------------------------------------|--------------------------------|
| Monday <input type="checkbox"/> | |
| Tuesday <input type="checkbox"/> | |
| Wednesday <input type="checkbox"/> | |
| Thursday <input type="checkbox"/> | |
| Friday <input type="checkbox"/> | |

Reminder: If a permanent booking is not attended for any reason, you will still be charged.

You are required to inform us of absence(s) as all non-attendances are treated as missing children.