CASUAL / FLEXIBLE BOOKING SHEET

DATE: /   /   Account Name: _____

*Hahndorf PS OSHC & Vac Care, 12 Church St, Hahndorf SA 5245 Phone: 8388 7420 ABN: **35 414 003 915***

Please indicate by your child's name if they are a pre-school aged child?

Child 1: _____ ❑ pre-school
Child 2: _____ ❑ pre-school
Child 3: _____ ❑ pre-school

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Please indicate type of booking required:
❑   **Annual** (all terms until this year's end)
❑   **Term**
❑   **Casual** (bookings as required–
please give as much notice as possible, to
ensure correct staffing ratios)
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To create a booking, please indicate your requirements by ensuring you fill in the box to the right. Indicate whether your Booking will be annual, term by term or casual.

Then, simply fill in either Section 1 (if your bookings are regular), or Section 2 (if your bookings revolve around rosters, etc). Use the child numbers above to indicate children attending (i.e. use 1,2 and/or 3).
Cancellations require five full OSHC working day's notice during term time. No cancellations accepted during Vac Care once accepted.

SECTION 1: (*regular bookings*)

	Monday		Tuesday		Wednesday		Thursday		Friday	
BSC Please indicate full or part session if required	7-8.30am	8-8.30am	7-8.30am	8-8.30am	7-8.30am	8-8.30am	7-8.30am	8-8.30am	7-8.30am	8-8.30am
ASC 3.15—6.30 pm										

REGULARITY (circle)   Weekly   Fortnightly   Beginning (Date) _____

SECTION 2: (*shift workers, rostered work, etc.*)

	Monday	Tuesday	Wednesday	Thursday	Friday
Week 1	BSC_____ ASC_____	BSC_____ ASC_____	BSC_____ ASC_____	BSC_____ ASC_____	BSC_____ ASC_____
Week 2	BSC_____ ASC_____	BSC_____ ASC_____	BSC_____ ASC_____	BSC_____ ASC_____	BSC_____ ASC_____
Week 3	BSC_____ ASC_____	BSC_____ ASC_____	BSC_____ ASC_____	BSC_____ ASC_____	BSC_____ ASC_____
Week 4	BSC_____ ASC_____	BSC_____ ASC_____	BSC_____ ASC_____	BSC_____ ASC_____	BSC_____ ASC_____
Week 5	BSC_____ ASC_____	BSC_____ ASC_____	BSC_____ ASC_____	BSC_____ ASC_____	BSC_____ ASC_____
Week 6	BSC_____ ASC_____	BSC_____ ASC_____	BSC_____ ASC_____	BSC_____ ASC_____	BSC_____ ASC_____
Week 7	BSC_____ ASC_____	BSC_____ ASC_____	BSC_____ ASC_____	BSC_____ ASC_____	BSC_____ ASC_____
Week 8	BSC_____ ASC_____	BSC_____ ASC_____	BSC_____ ASC_____	BSC_____ ASC_____	BSC_____ ASC_____
Week 9	BSC_____ ASC_____	BSC_____ ASC_____	BSC_____ ASC_____	BSC_____ ASC_____	BSC_____ ASC_____
Week 10	BSC_____ ASC_____	BSC_____ ASC_____	BSC_____ ASC_____	BSC_____ ASC_____	BSC_____ ASC_____
Week 11	BSC_____ ASC_____	BSC_____ ASC_____	BSC_____ ASC_____	BSC_____ ASC_____	BSC_____ ASC_____

~ Thank you for your prompt return of your OSHC booking sheet ~

BOOKING SHEET: Example

Child 1: _____Sally Smith_____ ❑ pre-school
Child 2: _____Thomas Smith_____ ❑ pre-school
Child 3: _____Riley Smith_____ ❑ pre-school

Please indicate type of booking required:
☑ **Term**
❑ **Annual** (all school terms until end 2009)
❑ **Casual** (bookings as required– please give as much notice as possible, to ensure correct staffing ratios)
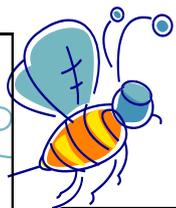
> **REQUIRED FIELD** (must be completed)
>
> **Write your child/rens names here.**
>
> The numbers next to each child will be used to indicate a booking in the tables below.

> **REQUIRED FIELD** (must be completed)
>
> Use this section to indicate the **time period** you would like your booking to extend.
> Please note: This booking sheet does not include Vacation Care periods.

> Use this section if you require regular bookings for your children due to work commitments etc. This booking indicates care is required for Child 1 & 2 for a short session on Thurs morning every week, starting on the 6th June, 2009.

SECTION 1: (for regular bookings)

	Monday		Tuesday		Wednesday		Thursday		Friday	
	7-8.30am	8-8.30am	7-8.30am	8-8.30am	7-8.30am	8-8.30am	7-8.30am	8-8.30am	7-8.30am	8-8.30am
BSC Please indicate full or part session if required								1&2		
ASC										

REGULARITY (circle) Weekly   Fortnightly   Beginning (Date) ___6/6/09___

REGULARITY (circle) Weekly   Fortnightly   Beginning (Date) _____

SECTION 2: (for shift workers, rostered work etc)

	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY
Week 1	BSC_____ ASC_____	BSC_____ ASC_____	BSC_____ ASC_____	BSC_ 1,3_ ASC_____	BSC_____ ASC_____
Week 2	BSC_____ ASC_____	BSC_____ ASC_____	BSC_____ ASC_____	BSC_____ ASC_____	BSC_____ ASC_____
Week 3	BSC_____ ASC_____	BSC_____ ASC_____	BSC_____ ASC_____	BSC_____ ASC_____	BSC_____ ASC_____
Week 4	BSC_____ ASC_____	BSC_ 1, 2, 3_ ASC_____	BSC_____ ASC_____	BSC_____ ASC_____	BSC_____ ASC_____
Week 5	BSC_____ ASC_____	BSC_____ ASC_____	BSC_____ ASC_____	BSC_____ ASC_____	BSC_____ ASC_____
Week 6	BSC_____ ASC_____	BSC_____ ASC_____	BSC_____ ASC_____	BSC_____ ASC_____	BSC_____ ASC_____
Week 7	BSC_____ ASC_____	BSC_____ ASC_____	BSC_____ ASC_____	BSC_____ ASC_____	BSC_____ ASC_____
Week 8	BSC_____ ASC_____	BSC_____ ASC_____	BSC_____ ASC_____	BSC_____ ASC_____	BSC_____ ASC_____
Week 9	BSC_____ ASC_____	BSC_____ ASC_____	BSC_____ ASC_____	BSC_____ ASC_____	BSC_____ ASC_____
Week 10	BSC_____ ASC_____	BSC_____ ASC_____	BSC_____ ASC_____	BSC_____ ASC_____	BSC_____ ASC_____

> Should your child require irregular days of care, due to work shifts or rosters, use this section.
>
> This booking indicates that care is required for Child 1 & 3 on Thurs, 30 April before school, and Child 1,2&3 on Tues, 19 May.
>
> **REMEMBER– FILL IN EITHER SECTION 1 OR SECTION 2.** Do not fill in both sections.

Hahndorf Primary School OSHC & Vacation Care– 12 Church Street, Hahndorf, SA 5245