



CHILD / CHILDREN HOLIDAY NOTIFICATION FORM

Parents are required to complete this form if their child/ren is/are going on holidays and they intend to return to care with the Educator and require the Educator to hold the place for their child/ren.

If a child is absent for a **continuous period of 8 weeks** or more, their enrolment will be cancelled by the Department of Education and any Child Care Subsidy (CCS) paid during the absent period will be recovered.

Based on the Department's advice, the Service has determined that no attendances will be lodged or absences claimed if a child's holiday period is more than **6 weeks**. If a child/s holiday period is 8 weeks or more, the Service will cancel enrolment at the commencement of the holiday period.

Child Name	Holiday Period		Date Returning to Care
	From	To	

I understand and agree that during the period that my child/ren is/are away on holidays, I am liable to pay the fees (i.e. full fees less any CCS) for absent days. I authorise the Service to lodge absences and claim CCS for my child/ren during his/her period of absence for the days that he/she would have normally attended care (i.e. booked days/ hours).

Parent/Guardian Name _____

Parent/Guardian Signature _____

Date: _____

Educator Signature _____

Date: _____