

# Change to Before/After School Care Days

(2 weeks notice required)

## NEWTOWN

Name of Child

.....

Changes are to commence in the week beginning: .....

	✓ Days currently attending		✓ Days required	
	AM	PM	AM	PM
Monday				
Tuesday				
Wednesday				
Thursday				
Friday				

Additional Information:

.....

.....

Parent's name: .....

Parent's Signature: .....

Date: .....