

Request for Changes Form



Date: ____ / ____ / ____

Name of child: _____

Room: _____

Current days enrolled: Mon Tue Wed Thu Fri

Centre location:

- Blacktown
 Girraween

ADDING DAYS

No. of days: ____ Days to add: Mon Tue Wed Thu Fri

Starting from: _____, ____ / ____ / ____ (Day, date)

REDUCING / REMOVING DAYS – At least four (4) weeks notice must be given to the centre

No. of days: ____ Days to remove: Mon Tue Wed Thu Fri

Starting from: _____, ____ / ____ / ____ (Day, date)

NB: Dropping any current days within three (3) months of adding new days will incur a \$100 administration fee. Four (4) weeks' notice must be provided for dropping days before you are able to pick up additional days.

RE-ENROL CHILD

Days requested: Mon Tue Wed Thu Fri

Starting from: _____, ____ / ____ / ____ (Day, date)

NB: A \$100 administration fee applies for re-enrolments

I, _____ (name of parent/guardian) authorise the above change(s) and understand that I will be notified of these change(s) by the Centre Director of Grow ELC in four (4) weeks, or when the position becomes available.

Signature of parent/guardian: _____ Date: ____ / ____ / ____

Contact number: _____

OFFICE USE ONLY

Date received: ____ / ____ / ____

Received by: _____

Entered: CC HW

Changes approved? YES / NO

Centre Director's Signature: _____

By: ____ Date: ____ / ____