

Notice of Intent to Leave

COM.011

Review Date: Dec 2019

I am aware 'as per signed enrolment contract' in order to cease my enrolment, I must provide the Service with 2 weeks written notice.

Non attendance during the 2 week notice period will result in ineligibility for Child Care Benefit reduction, therefore full fees will be payable for this period.

Date: _____ **Family Name:** _____

To the staff of Bay Island Early Learning and Care,

I wish to advise you, that I would like to cease my enrolment for child/ren,

Names: _____

My child/ren's last day of attendance will be Date: _____

Reason for leaving this service: _____

Parents Name: _____ Signed: _____

Office Use Only:	CCS Enrolment Cancelled:	Initial:	Date:	
	Booking Cancelled:	Initial:	Date:	
	Bus: Yes/No	If Yes Cancel	Initial:	Date:
	Room Advised:	Initial:	Date:	
	Payment Method:	CPay/D-Dep/Eftpos/Other		
	If CPay, Cancelled:	Initial:	Date:	

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