

e. dl.0251.oshc@schools.sa.edu.au

a. Caffrey Street, McLaren Vale SA 5171

8323 9217

Complying Written Arrangement for Child Care Subsidy - 2023

Dear families, please confirm acceptance of the following items so that our Service can receive Child Care funding on your behalf and reduce your fees.

Parties to the Agreement

Between	Name: _____ Address: _____
And	McLaren Vale Primary School OSHC, ABN 92 894 579 963
For the Care of	Child's Name: _____ DOB: _____ Start Date: _____ Child's Name: _____ DOB: _____ Start Date: _____ Child's Name: _____ DOB: _____ Start Date: _____
By	McLaren Vale Primary School OSHC, Caffrey Street Phone: 8323 9217 Email: dl.0251.oshc@schools.sa.edu.au

Routine/ongoing care Before School Care (please tick)

Day	Care Required	Session start	Session end	Fee	Unit
Monday		6:45 am	8:30 am	14.00	Session
Tuesday		6:45 am	8:30 am	14.00	Session
Wednesday		6:45 am	8:30 am	14.00	Session
Thursday		6:45am	8:30 am	14.00	Session
Friday		6:45 am	8:30 am	14.00	Session

Routine/ongoing care After School Care (please tick)

Day	Care Required	Session start	Session end	Fee	Unit
Monday		3:05 pm	6:30 pm	24.00	Session
Tuesday		3:05 pm	6:30 pm	24.00	Session
Wednesday		3:05 pm	6:30 pm	24.00	Session
Thursday		3:05 pm	6:30 pm	24.00	Session
Friday		3:05 pm	6:30 pm	24.00	Session

Casual/flexible care

Day	Fee	Unit
Any	\$29.00	Session

Vacation Care

Day	Fee	Unit
Any	\$55.00	Session

I confirm:

- the details I have provided above are true and correct
- I have agreed to the days of care and the start and end times of these sessions
- care may be provided on a casual or flexible basis where available at the Service in addition to routine care and
- I am liable to pay fees for my child's care as indicated above and in line with other information the Service makes available to me (such as a Fee Schedule) which are subject to change over time based on advice from the Provider.

Parent/Guardian Signature _____

Date / /