



Abbotsford Community Centre
350 Great North Rd
Abbotsford NSW 2046
Phone: 97131608
Email: accounts@accoosh.org.au
Web: www.accoosh.org.au
ABN: 25246379743

Confirmation of Childcare Agreement

Parties to the Agreement

Between: _____ (guardian)

(Applicants full name and address)

And: Abbotsford Community Centre, ABN 25246379743 (provider)

For the care of: _____ Starting _____ (child)

(Childs full name and date of birth)

(Start date)

By: Abbotsford Community Centre (Service)

As part of your enrolment at our service we require you to confirm acceptance of the following items in order to be able to receive Government funding on your behalf. Acceptance of these items as well as some of the other information in the enrolment form can be used as a Complying Written Arrangement (CWA) for child care subsidy purposes. Please read these terms and confirm by signing below.

Session and fee details

Permanent Days

Day	Session start	Session end	Usual Fee	Unit	Attends (tick)
Monday	7.00am	9.00am	\$16.00	Session fee	
Monday	3.00pm	6.30pm	\$26.00	Session fee	
Tuesday	7.00am	9.00am	\$16.00	Session fee	
Tuesday	3.00pm	6.30pm	\$26.00	Session fee	
Wednesday	7.00am	9.00am	\$16.00	Session fee	
Wednesday	3.00pm	6.30pm	\$26.00	Session fee	
Thursday	7.00am	9.00am	\$16.00	Session fee	
Thursday	3.00pm	6.30pm	\$26.00	Session fee	
Friday	7.00am	9.00am	\$16.00	Session fee	
Friday	3.00pm	6.30pm	\$26.00	Session fee	

Casual		
Before Care	After Care	
\$21	\$31	
Vacation Care per day		
\$45 first child	\$40 second child	
		\$50 casual

I confirm

- That my details in the enrolment form, as well as the details of the child/ren I am enrolling are correct.
- I have agreed to days of care in the service and understand the start and end times of these sessions of care.
- That care may be provided on a casual or flexible basis where available at my service at my request.
- I understand I am liable to pay fees for the care of my child/ren as indicated above and, if applicable, in other information the service has given me (such as a fee schedule or parent handbook) which are subject to change over time based on advice from the provider and acceptance by me.

Guardian Signature _____ Date _____