



# 2025 April Booking Form

Family Name of Child/ren: .....

## Week 1 April 14th-18th

Child's name	Monday 14th April	Tuesday 15th April	Wed 16th April	Thursday 17th April	Friday 18th April
					CLOSED
					CLOSED
					CLOSED

Parent/Carer Contact

Name: \_\_\_\_\_

Phone: \_\_\_\_\_

I Give Permission for my child to attend the following excursions:

14/4/2025- Edge Cinema- By bus

22/4/2025- Luna Park Sydney- By Charter Bus

28/4/2025- Edge Cinema- By bus

## Week 2 April 21st- 25th

Child's name	Monday 21st April	Tuesday 22nd April	Wed 23rd April	Thursday 24th April	Friday 25th April
	CLOSED				CLOSED
	CLOSED				CLOSED
	CLOSED				CLOSED

Parent/Carer Signature:

Date:

## Pupil free days April 28th-29th

Child's name	Monday 28th April	Tuesday 29th April

Please list any allergies your child may have:

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Please list any medical, dietary or behavioural needs your child may have:

**NB: If your child requires medication or has specific medical or behavioural needs whilst at KOOSH please contact Cate before your booking can finalised on 0478 166 352.**

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