



MIDNK
MOUNT ISA DAY NURSERY & KINDERGARTEN

NOTICE TO CHANGE CARE HOURS

DATE ____/____/____

Group _____

I wish to advise the centre that my child/ children

.....
Request to change booked care hours from

full time / part time to **full time / part time** care as of ____/____/____.

New days Request (please tick appropriate box/es):

Monday	Tuesday	Wednesday	Thursday	Friday

.....
Parent/Guardian