



# END ENROLMENT ADVICE

(we would appreciate at least 2 weeks notice please)

Child Name \_\_\_\_\_ Date of Birth \_\_\_\_\_

Last Day Child will be receiving Educarents home based education and care at

\_\_\_\_\_ (address of home where care is provided)

will be \_\_\_\_\_ (day) \_\_\_\_\_ (date)

- |                          |                                    |
|--------------------------|------------------------------------|
| <input type="checkbox"/> | Child going to school              |
| <input type="checkbox"/> | Child going to another ECE service |
| <input type="checkbox"/> | Other                              |

Parent / Guardian Signature \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_