

Activity Centres Bond/credit refund form

To be filled out by families when they request a bond refund

Child's Name:	Amount owed:
My Child's last booked day of care:	
My Child will no longer be attending any A	ACI service, please return any credit owed into my account.
Account Details	
Acc Name:	
BSB:	
Account No:	
☐ I understand that I will not receive my process can take up to 6 weeks.	refund until the Childcare subsidy (CCS) has been finalised; thi
Parent/ Guardians Name:	
Parent/Guardian Signature:	
Date:	
Please return this completed form to the	service Coordinator
Coordinators Signature:	
Date:	
Bookkeepers use only	
☐Bond/ credit returned to designated a☐Confirmation of bond return sent to C	
Bookkeepers Signature:	