

Please return this form to the ACA Qld office by via email to qld@childcarealliance.org.au or fax 07 3808 2466.

Contact Details

Name

Position

Service Name

Postal Address

Suburb: State: Postcode:

Phone Mobile: Fax:

Website

Email

Signature Date:

Are you a member of ACA Qld? ☐ Yes ☐ No

Booking Options

☐ Option 1 (Part B and C): 6 hour mentoring and 1 hour reflection/advice

☐ Option 2 (Part A, B and C): 2 hour professional development workshop, 6 hour mentoring and 1 hour reflection/advice

Preferred visit days: ☐ Monday ☐ Tuesday ☐ Wednesday ☐ Thursday ☐ Friday

Preferred Mentoring Focus: *Please select as required*

☐ Creative programming and thinking out of the box ☐ Build positive and engaged teams

☐ How to resource your service without breaking the bank ☐ Practical approaches in sustainability

☐ Create inviting indoor and outdoor play space ☐ Routines and transitions

☐ Manage documentation and understanding the connections between the National Quality Standards (NQS) and the Early Years Learning Framework (EYLF)

Preferred Workshop Focus (Option 2 only): *Please select one only*

☐ Creative programming and thinking out of the box ☐ Build positive and engaged teams

☐ How to resource your service without breaking the bank ☐ Practical approaches in sustainability

☐ Create inviting indoor and outdoor play space ☐ Routines and transitions

☐ Manage documentation and understanding the connections between the National Quality Standards (NQS) and the Early Years Learning Framework (EYLF)

Travel Zones

<input type="checkbox"/> Zone A:	<input type="checkbox"/> Zone B:	<input type="checkbox"/> Zone C:	<input type="checkbox"/> Zone D:
Brisbane	Ipswich	Townsville	All other locations
Sunshine Coast	Lockyer Valley	Mackay	
Logan	Toowoomba	Cairns	
Redlands	Gympie	Rockhampton	
Gold Coast	Maryborough	Bundaberg (metro only)	

Option 1 – In Service Mentoring (Part B & C)	\$1495	\$1595	\$2050	\$2200
Option 2 – Workshop + In Service Mentoring (Part A, B & C)	\$1990	\$2090	\$2540	\$2690

Option 1 – In Service Mentoring (Part B & C)	\$1770	\$1870	\$2220	\$2370
Option 2 – Workshop + In Service Mentoring (Part A, B & C)	\$2265	\$2365	\$2715	\$2865

Payment in full at time of booking.

Total amount payable (from table overleaf): \$

- ☐ Cheque: Make payable to Australian Childcare Alliance Qld. Post to PO Box 137, Springwood Qld 4127
- ☐ Direct Deposit: Bank West BSB: 304123 Account Number: 0520571 Reference "Your Service Name"

Credit Card

- ☐ Visa ☐ Mastercard

Card Number: / / / Expiry Date: / CCV:

Name on Card: _____ Signature: _____

Users of this program should understand that the support provided is for professional development purposes only and should not be used to inform operational decisions in isolation. All possible endeavours have been undertaken to ensure that training and advice is correct at the time of delivery. Users should make independent efforts to validate the support provided and not rely on it for assessment and rating under the National Quality Framework. No individual, organisation or otherwise should reproduce any of the material provided during the training without the express written consent of the Australian Childcare Alliance Queensland.

Cancellation Policy:

All requests for cancellation must be made in writing to gld@childcarealliance.org.au

All cancellations received 7 days or less before visit incur a 25% cancellation fee.

I am authorised to sign on behalf of the above Service. Signing of this form indicates acceptance of the above Terms and Conditions.

Signature: _____

Name: _____

Date: _____