



Australian Government
Family Assistance Office

Child Care Benefit advice of family details

This form is for parents who already receive, or have applied to receive Child Care Benefit as reduced fees.

The information provided on this form can be used to link you and your children to the child care service you nominate below. This link is necessary for you to receive Child Care Benefit as reduced fees from this service.

The authority to collect this information is contained in the family assistance law. Families wanting more information about privacy can call the Family Assistance Office on **13 6150** and ask for a fact sheet about *Your Right to Privacy*, or visit our website at www.familyassist.gov.au

If you have any questions about completing this form, please ask your child care service.

customer details

Note: Provide details of the person liable to pay the child care fees.

Family name			
Given names			
Date of birth	/	/	
Home address			state postcode
Contact telephone numbers	home ()	work ()	mobile
Customer Reference Number (if known)	- - - - -		

child details

Child 1

Child 2

Note: Only provide details of the children who attend this child care service.

Family name				
Given names				
Date of birth	/	/	male <input type="checkbox"/>	female <input type="checkbox"/>
Does this child attend school?	no <input type="checkbox"/>	yes <input type="checkbox"/>	▶ What date did they start?	/ /

Note: If more than 2 children, please attach a separate sheet.

other information

Are you or your partner the grandparent of this child?	no <input type="checkbox"/>	yes <input type="checkbox"/>	no <input type="checkbox"/>	yes <input type="checkbox"/>
Other changes to family or child information (if any)				

statement

- I declare that the information I have provided on this form is complete and correct.

Signature

Now give this form to your service provider

provider details

Note: To be completed by child care provider.

Name of Approved Service Provider			
Reference number	- - - - -		

◆ Please print or use a stamp

Fax this completed form to your payment team on 1800 700 533