



**VICTORIA PARK CHILD CARE CENTRE**  
**2020 CHILD CARE SCHEDULE REQUEST**  
**MARCH - APRIL 2020**  
 (includes May 1, 2020)

DATE RECEIVED IN OFFICE: (d)\_\_\_\_(m)\_\_\_\_(y)\_\_\_\_  
 APPROVED BY ADMIN: YES ( ) NO ( )  
 IF NO, STATE REASON: \_\_\_\_\_  
 SIGNATURE OF ADMIN: \_\_\_\_\_

<b>CHILD'S NAME:</b>					<b>PARENT/GUARDIAN NAME (PRINTED):</b>				
<b>Please indicate one of the following in <u>EVERY</u> weekday of the month:          the daily hours of care needed <u>OR</u> an "X" in the box beside "NO CARE"</b>									
<b>March 2020</b>					<b>April 2020 (includes May 1, 2020)</b>				
MON MAR 2	TUE 3	WED 4	THUR 5	FRI 6	MON 6	TUE 7	WED 8	THUR 9	FRI 10
									<b>CLOSED for GOOD FRIDAY</b>
NO CARE	NO CARE	NO CARE	NO CARE	NO CARE	NO CARE	NO CARE	NO CARE	NO CARE	NO CARE
MON 9	TUE 10	WED 11	THUR 12	FRI 13	MON 13	TUE 14	WED 15	THUR 16	FRI 17
				<b>PA Day ALL SCHOOLS</b>					
NO CARE	NO CARE	NO CARE	NO CARE	NO CARE	<b>PA Day ALL SCHOOLS</b>	NO CARE	NO CARE	NO CARE	NO CARE
MON 16	TUE 17	WED 18	THUR 19	FRI 20	MON 20	TUE 21	WED 22	THUR 23	FRI 24
									<b>PA Day ALL SCHOOLS</b>
<b>SCHOOL BREAK</b>	<b>SCHOOL BREAK</b>	<b>SCHOOL BREAK</b>	<b>SCHOOL BREAK</b>	<b>SCHOOL BREAK</b>	NO CARE	NO CARE	NO CARE	NO CARE	NO CARE
NO CARE	NO CARE	NO CARE	NO CARE	NO CARE	NO CARE	NO CARE	NO CARE	NO CARE	NO CARE
MON 23	TUE 24	WED 25	THUR 26	FRI 27	MON 27	TUE 28	WED 29	THUR 30	FRI MAY 1
NO CARE	NO CARE	NO CARE	NO CARE	NO CARE	NO CARE	NO CARE	NO CARE	NO CARE	NO CARE
MON 30	TUE 31	WED APR 1	THUR 2	FRI 3					
NO CARE	NO CARE	NO CARE	NO CARE	NO CARE					

I, hereby, confirm that the completed schedule request reflects my child care needs. I understand that I will be billed according to this schedule once approved. Additional days may be added ONLY IF SPACE PERMITS. Arriving unexpectedly cannot be permitted. Changes to the schedule (request to add days/cancel days/book vacation time) must be submitted in writing on the **Change to Schedule Form TWO** weeks before the change will occur. Full fees apply if notice is less than **TWO** weeks and when all "free" days are used.

**Parent/Guardian Signature:** \_\_\_\_\_ **Date:** (d) \_\_\_\_ (m) \_\_\_\_ (y) \_\_\_\_

**SUBMIT THIS COMPLETED SCHEDULE TO THE OFFICE BEFORE: FEBRUARY 7, 2019**

\*\*\*\* SPACES LIMITED \*\*\*\*