

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:

	(1010400711	u, ., _u_	<u> </u>										,
CHILD'S NAME:						PARENT/GUARDIAN NAME (PRINTED):								
Please indicate one of the following in <u>EVERY</u> weekday of the month:														
		ne daily hour												
March 2020								April 2					1, 20 1	19)
MON MAR 2	TUE	3 WED 4	THUR 5	FRI 6		MON	6	TUE	7	WED	8	THUR	9	FRI 10
														CLOSED for GOOD FRIDAY
NO CARE	NO CARE	NO CARE	NO CARE	NO CARE		NO CARE		NO CARE		NO CARE		NO CARE		NO CARE
MON 9	TUE 1	0 WED 11	THUR 12	FRI 13		MON	13	TUE	14	WED	15	THUR	16	FRI 17
				PA Day ALL schools		PA Do								
NO CARE	NO CARE	NO CARE	NO CARE	NO CARE		NO CARE		NO CARE		NO CARE		NO CARE		NO CARE
MON 16		7 WED 18	THUR 19	FRI 20	1	MON	20	TUE	21	WED	22	THUR	23	FRI 24
														PA Day
SCHOOL BREAK	SCHOOL BREA	K SCHOOL BREAK	SCHOOL BREAK	SCHOOL BREAK										ALL schools
NO CARE	NO CARE	NO CARE	NO CARE	NO CARE		NO CARE		NO CARE		NO CARE		NO CARE		NO CARE
MON 23	TUE 2	4 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	NO	NO CARE	THUR 2	FRI 3										
CARE	CARE	CARE	CARE	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 <u>TWO</u>** weeks before the change will occur. Full fees apply if notice is less than <u>TWO</u> weeks and when all "free" days are used.

Parent/Guardian Signature:	Date: (d)	(m)	(y)
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