



**COOK'S HOME CHILD CARE AGENCY  
CHILD CARE SCHEDULE REQUEST  
December 2020**

**SPECIAL DATES**

Dec 21 to Jan 1: School Christmas Break \* (CB)  
Dec 24 & 31: \* **Close Noon**  
Dec 25: Christmas Day (closed)

<b>CHILD'S NAME:</b>		<b>PARENT/GUARDIAN NAME (PRINTED):</b>				
Please indicate one of the following in <u>EVERY</u> weekday of the month: the daily hours of care needed OR check the box beside "NO CARE"						
Month: December 2020						
		<b>TUE</b>	<b>WED</b>	<b>THUR</b>	<b>FRI</b>	<b>SAT</b>
		Time In	Time In	Time In	Time In	Time In
		Time Out	Time Out	Time Out	Time Out	Time Out
		NO CARE	NO CARE	NO CARE	NO CARE	NO CARE
<b>SUN</b>	<b>MON</b>	<b>TUE</b>	<b>WED</b>	<b>THUR</b>	<b>FRI</b>	<b>SAT</b>
Time In	Time In	Time In	Time In	Time In	Time In	Time In
Time Out	Time Out	Time Out	Time Out	Time Out	Time Out	Time Out
NO CARE	NO CARE	NO CARE	NO CARE	NO CARE	NO CARE	NO CARE
<b>SUN</b>	<b>MON</b>	<b>TUE</b>	<b>WED</b>	<b>THUR</b>	<b>FRI</b>	<b>SAT</b>
Time In	Time In	Time In	Time In	Time In	Time In	Time In
Time Out	Time Out	Time Out	Time Out	Time Out	Time Out	Time Out
NO CARE	NO CARE	NO CARE	NO CARE	NO CARE	NO CARE	NO CARE
<b>SUN</b>	<b>*MON CB</b>	<b>*TUE CB</b>	<b>*WED CB</b>	<b>*THUR <small>Close Noon</small></b>	<b>*FRI CB</b>	<b>SAT</b>
Time In	Time In	Time In	Time In	Time In	<b>Closed for Christmas Day</b>	Time In
Time Out	Time Out	Time Out	Time Out	Time Out		Time Out
NO CARE	NO CARE	NO CARE	NO CARE	NO CARE		NO CARE
<b>SUN</b>	<b>*MON CB</b>	<b>*TUE CB</b>	<b>*WED CB</b>	<b>*THUR <small>Close Noon</small></b>		
Time In	<b>Closed for Boxing Day</b>	Time In	Time In	Time In		
Time Out		Time Out	Time Out	Time Out		
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 it is 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: \_\_\_\_\_

**SUBMIT THIS COMPLETED SCHEDULE TO THE OFFICE BEFORE: November 16, 2020**

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