

VICTORIA PARK CHILD CARE CENTRE CHILD CARE SCHEDULE REQUEST

September & October 2025

SPECIAL DATES

September 01- Labour Day- CLOSED September 26-Staff Training-CLOSED September 26- PA Day October 13- Thanksgiving - CLOSED PA Day- October 24

CHILD'S NAME:		PARENT/GUARDIAN NAME (PRINTED):
	DI 1 11 1 1 1 1 1 1	· EVERY

Please indicate one of the following in EVERY weekday of the month:

Month:	SEPTEM	IBER 2025	,		Month:	ОСТОВЕ	R 2025		
MON	TUE	WED	THU	FRI			WED	THU	FRI
ABOUR	Time In	Time In	Time In	Time In			Time In	Time In	Time In
PAY	Time Out	Time Out	Time Out	Time Out			Time Out	Time Out	Time Out
CLOSED	NO CARE	NO CARE	NO CARE	NO CARE			NO CARE	NO CARE	NO CAR
MON	TUE	WED	THU	FRI	MON	TUE	WED	THU	FRI
Time In	Time In	Time In	Time In	Time In	Time In	Time In	Time In	Time In	Time In
Time	Time	Time	Time	Time	Time	Time	Time	Time	Time
NO CARE	NO CARE	Out NO CARE	Out NO CARE	NO CARE	NO CARE	NO CARE	Out NO CARE	Out NO CARE	Out NO CAR
MON	TUE	WED	THU	FRI	MON	TUE	WED	THU	FRI
Time In	Time In	Time In	Time In	Time In	THANKS	Time In	Time In	Time In	Time In
Time	Time	Time	Time Out	Time	GIVING	Time	Time	Time Out	Time Out
Out NO CARE	NO CARE	Out NO CARE	NO CARE	NO CARE	CLOSED	NO CARE	Out NO CARE	NO CARE	NO CAR
MON	TUE	WED	THU	FRI	MON	TUE	WED	THU	FRI
Time In	Time In	Time In	Time In	STAFF	Time In	Time In	Time In	Time In	Time In
Time Out	Time Out	Time Out	Time Out	TRAINING CLOSED	Time Out	Time Out	Time Out	Time Out	Time Out
NO CARE	NO CARE	NO CARE	NO CARE		NO CARE	NO CARE	NO CARE	NO CARE	NO CAR
MON	TUE		1	1	MON	TUE	WED	THU	FRI
Time In	Time In	7			Time In	Time In	Time In	Time In	Time In
Time Out	Time Out	7			Time Out	Time Out	Time Out	Time Out	Time Out
NO CARE	NO CARE	7			NO CARE	NO CARE	NO CARE	NO CARE	NO CAR

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:
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SUBMIT THIS COMPLETED SCHEDULE TO THE OFFICE BEFORE: AUGUST 08, 2025

**** SPACES LIMITED ****