



VICTORIA PARK CHILD CARE CENTRE
CHILD CARE SCHEDULE REQUEST
JULY/ AUGUST 2026

SPECIAL DATES

July 01- Canada Day- **CLOSED**
 August 03- Civic Holiday- **CLOSED**

CHILD'S NAME:

**PARENT/GUARDIAN
NAME (PRINTED):**

Please indicate one of the following in **EVERY** weekday of the month:
 the daily hours of care needed **OR** check the box beside "NO CARE"

Month: JULY 2026

*****PLEASE NOTE THE EARLY
SUBMISSION DATE BELOW *****

MON	TUE	WED	THU	FRI
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

MON	TUE	WED	THU	FRI
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

MON	TUE	WED	THU	FRI
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

MON	TUE	WED	THU	FRI
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

Month: AUGUST 2026

MON	TUE	WED	THU	FRI
Civic Holiday- Daycare Closed	Time In	Time In	Time In	Time In
	Time Out	Time Out	Time Out	Time Out
	NO CARE	NO CARE	NO CARE	NO CARE

*MON	TUE	WED	THU	FRI
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

MON	TUE	WED	THU	FRI
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

MON	TUE	WED	*THU	FRI
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

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** **FOUR** weeks before the change will occur. Full fees apply if notice is less than **FOUR** weeks and when all "free" days are used.

Parent/Guardian Signature: _____ **Date:** _____

SUBMIT THIS COMPLETED SCHEDULE TO THE OFFICE BEFORE: MAY 15, 2026

****** SPACES LIMITED ******