SPECIAL DATES

May 24- Victoria Day- **CLOSED**
June 04- PA Day
June 30- PA Day
July 01- Canada Day- **Closed**

VICTORIA PARK CHILD CARE CENTRE
CHILD CARE SCHEDULE REQUEST
MAY & JUNE 2027

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: MAY

MON 3	TUE 4	WED 5	THU 6	FRI 7
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 10	**TUE 11**	**WED 12**	**THU 13**	**FRI 14**
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 17	**TUE 18**	**WED 19**	**THU 20**	**FRI 21**
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 24	**TUE 25**	**WED 26**	**THU 27**	**FRI 28**
Victoria Day- 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 31				
Time In				
Time Out				
NO CARE				

Month: JUNE/ JULY

MON	TUE 1	WED 2	THU 3	FRI 4
	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 7	**TUE 8**	**WED 9**	**THU 10**	**FRI 11**
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 14	**TUE 15**	**WED 16**	**THU 17**	**FRI 18**
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 21	**TUE 22**	**WED 23**	**THU 24**	**FRI 25**
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 28	**TUE 29**	**WED 30**	**THU 1**	**FRI 2**
Time In	Time In	Time In	Canada Day- Closed	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: April 02, 2027

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

SUBMIT