

VACATION REQUEST FORM



Lake Stevens
CHRISTIAN DAYCARE
and Preschool

Please turn in your vacation request forms in advance.

Each eligible family has two weeks of vacation time per year. When used you will not be charged the minimum nine-hour attendance fee.

Please use one form per child and one column per week.

Today's Date:	Today's Date:
Parent's Name:	Parent's Name:
Child's Name:	Child's Name:
<input type="checkbox"/> Infant <input type="checkbox"/> Toddler <input type="checkbox"/> Pre-School <input type="checkbox"/> Pre-K <input type="checkbox"/> School Age	<input type="checkbox"/> Infant <input type="checkbox"/> Toddler <input type="checkbox"/> Pre-School <input type="checkbox"/> Pre-K <input type="checkbox"/> School Age
<input type="checkbox"/> Week One	<input type="checkbox"/> Week Two
Vacation Days Requested (no split weeks) _____ to _____	Vacation Days Requested (no split weeks) _____ to _____
Parent's Signature _____	Parent's Signature _____
Office Use Only	Office Use Only