


APRIL - 2010

Childs Name _____

Camrose Children's Centre

Day Care & Family Day Home Monthly Calendar Contract

SUNDAY	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY
				1	2 Good Friday Daycare & Family Day Homes Closed	3
4 Easter Sunday 	5	6	7	8	9	10
11	12	13	14	15	16	17
18	19	20	21	22	23	24
25	26	27	28	29	30	

Please Circle one of the Rate Categories Below – By Signing, You Agree to Pay the Rate Circled Below

Hourly

Daily

Monthly

Signature of Parent or Guardian: _____ Date: _____

Immunizations are up to date: Yes _____ No _____ Initial _____

If Your Contact Information Has Changed, Please Complete:

Address: _____

Home Phone: _____ Work Phone: _____ Cell Phone: _____

Employer: _____