


MAY - 2010

Childs Name _____

Camrose Children's Centre

Day Care & Family Day Home Monthly Calendar Contract

SUNDAY	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY
						1
2	3	4	5	6	7	8
9  Mothers Day	10	11	12	13	14	15
16	17	18	19	20	21	22
23	24 Victoria Day Day Care & Family Day Homes Closed	25	26	27	28	29
30	31					

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: _____		