

Spn
Summer Care
2☺14



YES! We need summer care...

Child's name: _____ Age: _____

Child's name: _____ Age: _____

Child's name: _____ Age: _____

Full Time / Part Time

Monday Tuesday Wednesday Thursday Friday

Please circle the days needed

What hours will your child/ren be attending: _____

The information given will be very helpful for staffing summer care.

Please return this form on or before Thursday, April 10th.

Registration will be on Thursday, May 1st in the school cafeteria from 3:00-5:00 pm. If you are unable make it, let me know and forms can be sent home.

If you have any questions please call Mrs. Holzapfel @
402-455-8282.

Thanks!