



Larch Street Kids Child Care Centre

# Request/Change of Care Form

\*Parents are responsible to inform the agency of any changes.

\*All requests require 2 weeks' notice. Inadequate notice will result in regular fees being charged.

Date: \_\_\_\_\_ Child's Name: \_\_\_\_\_

Site: \_\_\_\_\_ Parent's Name: \_\_\_\_\_

Please check off which request or change of care you are giving:

- Withdrawing from Program
- Schedule Change (Full-Time to Part-Time)
- Schedule Change (Part-Time to Full-Time)
- Site Change (moving from one site to another)

Request:

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Parent's Signature: \_\_\_\_\_

Supervisor Signature: \_\_\_\_\_

Office Use Only

Date Received at Administration Office: \_\_\_\_\_ Approved by: \_\_\_\_\_