



CHILD'S NAME \_\_\_\_\_

will be attending KCK Summer Fun 2019 during the following weeks. This commitment to attend is crucial to staff planning and scheduling.

**\*\*Any changes to this schedule must be in writing and at least two weeks in advance\*\***

By signing this form I am committing to the schedule below and will be responsible to such payments. I am allowed two weeks' vacation throughout the summer other weeks will be charged the part time rate.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**\*\*\*NOTICE: Families who utilize state assistance will be billed for the weekly fee. However, KCK will bill the state of SD for the hours the child attended, which may be less than charges. Any additional charges will be the responsibility of the parents. \*\*\***

DATE	M	T	W	Th	F
June 3 - June 7					
June 10 - June 14					
June 17 - June 21					
June 24 - June 28					
July 1 - July 5					
July 8 - July 12					
July 15 - July 19					
July 22 - July 26					
July 29 - August 2					
August 5 - August 9					

Please place an X on the dates your child WILL be attending!

Summer Fun 2019 will be closed July 4<sup>th</sup> and July 5<sup>th</sup>.

A copy of this schedule will be given to you in May. Changes may be made at that time.

DATE	CHANGE MADE IN RED INK	STAFF INITIALS

At times throughout the summer, parents or volunteer drivers will be transporting my child \_\_\_\_\_, by car or public transportation, to activities. I am aware of this and approve.

Parent signature \_\_\_\_\_ Date: \_\_\_\_\_