Change permanent days Change permanent days Change permanent days (2 weeks' notice required) (2 weeks' notice required) (2 weeks' notice required) City City City Child's name: Child's name:_____ Child's name: Week Commencing: Week Commencing: Week Commencing: **✓** Days Davs Davs Davs currently currently currently required required required attending attending attending Monday Monday Monday Tuesday Tuesday Tuesday Wednesday Wednesday Wednesday **Thursday Thursday** Thursday Friday Friday Friday Additional Information: Additional Information: Additional Information: _____ Parent's name: Parent's name: Parent's name: Parent's Signature: _____ Parent's Signature: Parent's Signature: _____ Date: _____ Date: Date: _____