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| **DAY-CARE for the summer weeks 29 and 30 – 2024** |  |

**INFORMATION ABOUT THE CHILD:**

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| --- | --- | --- |
| The child’s name |  | |
| CPR no. |  | |
| Address |  | Tel.no.: |
| Name(s) of parent(s) |  | |
| Name of the institution |  | |
| Your wish for a holiday day-care institution |  | |
| Starts in bridge-building, date, and name of SFO: (out of school club) |  | |
| Special information, which is important for the day-care institution to know, (medication, habits, support/special conditions etc.) |  | |

**WE NEED DAY-CARE DURING THE FOLLOWING WEEK(S)** (please mark with a cross)**:**

|  |  |
| --- | --- |
| Week 29  15. - 19. July 2024 | Week 30  22. – 26. July 2024 |

# WE NEED DAY-CARE ON THE FOLLOWING INDIVIDUAL DAYS DURING THE WEEKS 29-30:

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| --- |
| Following days: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

**NEED FOR DAILY DAY-CARE:**

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| Monday – Thursday from \_\_\_\_\_\_\_\_\_\_\_\_\_\_o’clock until \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_o’clock  Friday -from\_\_\_\_\_\_\_\_\_\_\_ o’clock until \_\_\_\_\_\_\_\_\_ o’clock (the institution closes earlier on Fridays) |

**DATE\_\_\_\_\_\_\_\_\_\_\_\_**

**SIGNATURE OF THE PARENT\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Registration deadline in your own institution is 1 March 2024**