

# RESERVE FORM

February 2019

Month



**KIDS INC.**

Site \_\_\_\_\_

Contact Name \_\_\_\_\_

Child's Name \_\_\_\_\_

Contact Cell \_\_\_\_\_

School Attends \_\_\_\_\_

Home Phone \_\_\_\_\_

Mark the days you want to reserve child care for the month.  
In order for your child to attend, a monthly reserve form is required.

Everyday

Monday	Tuesday	Wednesday	Thursday	Friday
				1 NO PROGRAM
4 PM <input type="checkbox"/>	5 PM <input type="checkbox"/>	6 PM <input type="checkbox"/>	7 PM <input type="checkbox"/>	8 PM <input type="checkbox"/>
11 PM <input type="checkbox"/>	12 PM <input type="checkbox"/>	13 PM <input type="checkbox"/>	14 PM <input type="checkbox"/>	15 PM <input type="checkbox"/>
18 HOLIDAY	19 PM <input type="checkbox"/>	20 PM <input type="checkbox"/>	21 PM <input type="checkbox"/>	22 PM <input type="checkbox"/>
25 PM <input type="checkbox"/>	26 PM <input type="checkbox"/>	27 PM <input type="checkbox"/>	28 PM <input type="checkbox"/>	

Additional Scheduling Information

**Please remember to call  
the District Office at  
541.389.7275  
if your child will not be  
attending KIDS INC. on  
a reserved day.**