

RESERVE FORM

May 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 PM <input type="checkbox"/>	2 PM <input type="checkbox"/>	3 PM <input type="checkbox"/>
6 PM <input type="checkbox"/>	7 PM <input type="checkbox"/>	8 PM <input type="checkbox"/>	9 PM <input type="checkbox"/>	10 PM <input type="checkbox"/>
13 PM <input type="checkbox"/>	14 PM <input type="checkbox"/>	15 PM <input type="checkbox"/>	16 PM <input type="checkbox"/>	17 PM <input type="checkbox"/>
20 PM <input type="checkbox"/>	21 PM <input type="checkbox"/>	22 PM <input type="checkbox"/>	23 PM <input type="checkbox"/>	24 PM <input type="checkbox"/>
27 HOLIDAY	28 PM <input type="checkbox"/>	29 PM <input type="checkbox"/>	30 PM <input type="checkbox"/>	31 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.**