

Child Care Change Request Form

814 Hart Road, Round Lake, IL 60073
P: 847.546.8558
www.roundlakeareaparkdistrict.org



Parent/Legal Guardian:

Last Name: _____ First Name: _____

Address: _____ City/State/Zip: _____

Primary Phone: _____ Email: _____

Child/Children requesting schedule change for:

Last Name: _____ First Name: _____

Please Note:

Preschool schedule change requests need to be in by the week prior to the change date requested.

School Age schedule change requests need to be done by the 15th of the prior month to the requested schedule change.

Current Schedule Preschool Childcare					
	2yr	3-5yr			
Before	M	TU	W	TH	F
Full Day	M	TU	W	TH	F
After	M	TU	W	TH	F

Current Schedule School Age Childcare					
Before	M	TU	W	TH	F
After	M	TU	W	TH	F

New Schedule Preschool Childcare					
	2yr	3-5yr			
Before	M	TU	W	TH	F
Full Day	M	TU	W	TH	F
After	M	TU	W	TH	F

New Schedule School Age Childcare					
Before	M	TU	W	TH	F
After	M	TU	W	TH	F

Reason for Change: _____

Are you an employee? _____ What discount do you receive? _____%

Parent or Legal Guardian Signature: _____ Date: _____

For Office Use:

Supervisor Approval: _____ Date Processed: _____ Staff: _____