

KINDERPLACE ABSENT DAY CREDIT FORM

CHILD'S NAME : _____

DATE TO BE USED : _____ **(MUST BE SENT IN AT LEAST 5 BUSINESS DAYS IN ADVANCE)**

DATE: _____

PARENT SIGNATURE: _____

FORWARD TO BRENDA SAS BY EMAIL AT brenda_kinderplace@tbaytel.net or must be handed in to Brenda /Tina.