

Oberlin Early Childhood Center

Vacation Form

(Minimum 3wks)

Please provide written notice two (2) weeks prior to vacation start.

Please complete and turn into the Office

Child's Name: _____ Classroom: _____

Child's Name: _____ Classroom: _____

Child's Name: _____ Classroom: _____

Last Day of Attendance: _____ Return Date: _____

All families MUST fill out a Leave of Absence Form, if your child/children will not be attending the center for more than 4 consecutive weeks. If your child/children have not returned by the stated return date, and a Leave of Absence form is not on file, you will forfeit your deposit and your child will be placed on the bottom of the wait list for future enrollment.

***I understand I must continue to pay my tuition balance by the 10th of the month.**

***By signing this form I understand and agree to the statement above.**

Parent Signature **Date:** _____

Office Use Only: _____

Date Received: _____

- Copy to Teacher
- Copy to Secretary