



FAMILY VACATION NOTIFICATION

Child's Name _____ Date _____

Days of Regular Attendance (circle) Monday Tuesday Wednesday Thursday Friday

First Day of Absence: ____/____/____ Last Day of Absence: ____/____/____ # of Days: _____

Requesting Vacation Credit No Yes If yes, 1 week credit 2 weeks credit

Vacation Credit Policy:

ScuttleBugs CDC offers families a two week per calendar year vacation leave who have been enrolled for at least 3 months. A credit of 50% off the regular tuition for the two weeks will be issued. To be eligible to receive this discounted rate we require 14 days written notice of planned vacation leave. This discount will only be applied in weekly increments (2 x 1 week periods or 1 x 2 week period).

>>>Weekly vacation credit absences must fall within the same calendar week.

Accounts are not eligible for vacation credits during the last month of enrollment. In the event where a family submits a withdrawal notice after a vacation credit has been issued, the credit will be reversed.

Parent/Guardian Name _____ Date _____

Parent/Guardian Signature _____