

**PLEASE FILL OUT THIS FORM AND**  
**GIVE IT TO YOUR CHILD'S**  
**TEACHER**

Date: \_\_\_\_\_

Dear: \_\_\_\_\_

This is to inform you that my child \_\_\_\_\_

Grade \_\_\_\_\_ Class \_\_\_\_\_ Room # \_\_\_\_\_

Will be attending the Kings Bay Y After School Program for the 2016 -  
2017 school year.

Days in the Program

Monday \_\_\_\_\_ Tuesday \_\_\_\_\_ Wednesday \_\_\_\_\_ Thursday \_\_\_\_\_ Friday \_\_\_\_\_

Thank you in advance,

Name \_\_\_\_\_

Address \_\_\_\_\_

Phone # \_\_\_\_\_