

Drop Notice

ACTIVE Net Head of Household #: _____

Community Center / Program Name: _____

 My child(ren) **WILL NOT** be attending the checked programs listed below.

Child's Name (LAST, FIRST): _____ **Date of Birth:** _____

2020 Summer Camp(s)	2020-2021 School Year Programs			
	Before School	After School	School Break Camps	Preschool
<input type="checkbox"/> Week 1; June 22-26	<input type="checkbox"/> September	<input type="checkbox"/> September	<input type="checkbox"/> Winter Break Wk. 1	<input type="checkbox"/> September
<input type="checkbox"/> Week 2; Jun 29-Jul 3	<input type="checkbox"/> October	<input type="checkbox"/> October	<input type="checkbox"/> Winter Break Wk. 2	<input type="checkbox"/> October
<input type="checkbox"/> Week 3; July 6-10	<input type="checkbox"/> November	<input type="checkbox"/> November	<input type="checkbox"/> Mid-Winter Break	<input type="checkbox"/> November
<input type="checkbox"/> Week 4; July 13-17	<input type="checkbox"/> December	<input type="checkbox"/> December	<input type="checkbox"/> Spring Break	<input type="checkbox"/> December
<input type="checkbox"/> Week 5; July 20-24	<input type="checkbox"/> January	<input type="checkbox"/> January		<input type="checkbox"/> January
<input type="checkbox"/> Week 6; July 27-31	<input type="checkbox"/> February	<input type="checkbox"/> February	<input type="checkbox"/> Day between Semesters	<input type="checkbox"/> February
<input type="checkbox"/> Week 7; Aug 3-7	<input type="checkbox"/> March	<input type="checkbox"/> March	<input type="checkbox"/> Nov. Conference Day	<input type="checkbox"/> March
<input type="checkbox"/> Week 8; Aug 10-14	<input type="checkbox"/> April	<input type="checkbox"/> April	<input type="checkbox"/> Prof. Development Days	<input type="checkbox"/> April
<input type="checkbox"/> Week 9; Aug 17-21	<input type="checkbox"/> May	<input type="checkbox"/> May	<input type="checkbox"/> Other: _____	<input type="checkbox"/> May
<input type="checkbox"/> Week 10; Aug 24-28	<input type="checkbox"/> June	<input type="checkbox"/> June		<input type="checkbox"/> June
<input type="checkbox"/> Week 11; Aug 31-Sep 4				

Child's Name (LAST, FIRST): _____ **Date of Birth:** _____

2020 Summer Camp(s)	2020-2021 School Year Programs			
	Before School	After School	School Break Camps	Preschool
<input type="checkbox"/> Week 1; June 22-26	<input type="checkbox"/> September	<input type="checkbox"/> September	<input type="checkbox"/> Winter Break Wk. 1	<input type="checkbox"/> September
<input type="checkbox"/> Week 2; Jun 29-Jul 3	<input type="checkbox"/> October	<input type="checkbox"/> October	<input type="checkbox"/> Winter Break Wk. 2	<input type="checkbox"/> October
<input type="checkbox"/> Week 3; July 6-10	<input type="checkbox"/> November	<input type="checkbox"/> November	<input type="checkbox"/> Mid-Winter Break	<input type="checkbox"/> November
<input type="checkbox"/> Week 4; July 13-17	<input type="checkbox"/> December	<input type="checkbox"/> December	<input type="checkbox"/> Spring Break	<input type="checkbox"/> December
<input type="checkbox"/> Week 5; July 20-24	<input type="checkbox"/> January	<input type="checkbox"/> January		<input type="checkbox"/> January
<input type="checkbox"/> Week 6; July 27-31	<input type="checkbox"/> February	<input type="checkbox"/> February	<input type="checkbox"/> Day between Semesters	<input type="checkbox"/> February
<input type="checkbox"/> Week 7; Aug 3-7	<input type="checkbox"/> March	<input type="checkbox"/> March	<input type="checkbox"/> Nov. Conference Day	<input type="checkbox"/> March
<input type="checkbox"/> Week 8; Aug 10-14	<input type="checkbox"/> April	<input type="checkbox"/> April	<input type="checkbox"/> Prof. Development Days	<input type="checkbox"/> April
<input type="checkbox"/> Week 9; Aug 17-21	<input type="checkbox"/> May	<input type="checkbox"/> May	<input type="checkbox"/> Other: _____	<input type="checkbox"/> May
<input type="checkbox"/> Week 10; Aug 24-28	<input type="checkbox"/> June	<input type="checkbox"/> June		<input type="checkbox"/> June
<input type="checkbox"/> Week 11; Aug 31-Sep 4				

 I am releasing the scholarship allocations for the above checked program(s) for my child(ren). I am providing notification two (2) weeks before the start of the programs checked above.

Parent/Guardian Print Name

Parent/Guardian Signature

Date

Site Staff Name (PRINT) : _____ Date: _____ [Send to: Box #25 or PKS_Parks_Scholarship@seattle.gov]