

FIRST CIRCLE LEARNING CENTERS DROP-IN REQUEST FORM



THIS FORM IS PRINT-ONLY. THE COMPLETED FORM CAN BE DELIVERED BY HAND OR SCANNED AND EMAILED DIRECTLY TO YOUR FIRST CIRCLE LOCATION.
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NAME OF CHILD(REN)		DROP-IN DATE(S)	ARRIVE	DEPART
I PREFER TO				
<input type="checkbox"/> Pay the fee on the day of the drop-in <input type="checkbox"/> Have the fee charged to my credit card on file				

A FEW NOTES REGARDING DROP-IN

- ☉ We will try our best to accommodate all requests for drop-in based on a combination of space in the classroom and staffing. Occasionally, we may have space available in the classroom but have staffing constraints that prevent us from being able to accept drop-in children on a particular day or time.
- ☉ Once we have confirmed your drop-in request, we will charge your account for the hours you request (in full-hour increments). If your child is here for more hours than previously requested, the hourly rate for the additional hours will apply.
- ☉ If you will not need your drop-in date, please let us know as soon as possible. Because we schedule staff in advance to accommodate drop-in children, there will be a 50% charge for any drop-in request cancelled with less than 48 hours' notice.

TO BE COMPLETED BY OFFICE

SCHEDULE CONFIRMED	CHARGE	
<input type="checkbox"/> yes <input type="checkbox"/> no	_____ hours @ \$_____ / hr	<input type="checkbox"/> noted on schedules <input type="checkbox"/> noted on log <input type="checkbox"/> charged in ProCare <input type="checkbox"/> classroom notified ____/____/____ <input type="checkbox"/> parent notified ____/____/____
COMMENTS		