



TLC Summer Program Questionnaire

Please complete and return this form by April 1, 2021

Child's Name _____

School _____

Current Class _____

☐ My child will attend TLC this summer and their schedule will remain the same.

☐ My child will not attend TLC this summer.

☐ My child will attend TLC but change their schedule to the following days and times:

Days	Times
<input type="checkbox"/> Monday	_____
<input type="checkbox"/> Tuesday	_____
<input type="checkbox"/> Wednesday	_____
<input type="checkbox"/> Thursday	_____
<input type="checkbox"/> Friday	_____