



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	_____