**Planning contrat en selon horaire**

**CRECHE**

Fréquentation mensuelle 2024

**MAI**

**Nom et prénom de l’enfant :**

**Signature(s) du/des parents** :

**Planning reçu le** : ……………………………. (à remplir par la Chocolatine)

*Mettre une* ***X*** *dans les cases correspondantes*

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **DATES** | **MATIN** | **DEJ’** | **2/3 (dès 11h)** | **2/3 (jusqu’à 14h)** | **APM** | **JOURNEE** | **REMARQUES** |
| Mercredi 1er | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  |       |
| Jeudi 2 | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  |       |
| Vendredi 3 | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  |       |
|  |  |
| Lundi 6 | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  |       |
| Mardi 7 | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  |       |
| Mercredi 8 | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  |       |
| Jeudi 9 | **Fermé** |
| Vendredi 10 | **Fermé** |
|  |  |
| Lundi 13 | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  |       |
| Mardi 14 | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  |       |
| Mercredi 15 | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  |       |
| Jeudi 16 | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  |       |
| Vendredi 17 | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  |       |
|  |  |
| Lundi 20 | **Fermé** |
| Mardi 21 | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  |       |
| Mercredi 22 | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  |       |
| Jeudi 23 | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  |       |
| Vendredi 24 | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  |       |
|  |  |
| Lundi 27 | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  |       |
| Mardi 28 | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  |       |
| Mercredi 29 | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  |       |
| Jeudi 30 | **Fermé** |
| Vendredi 31 | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  |       |