



REQUEST TO GO INACTIVE FORM

Please complete the information below and return to the Vacation Station business office.

Site/School: _____

Date: _____

Child or Children's Name(s): _____

Please inactivate the child or children listed above from the following program or programs:

—IMPORTANT—

School Day Program

Early Release Program

Inactive status is allowed one time per school year for life change events such as natural disasters, maternity leave, family emergencies, etc...

Non-School Day Program

Summer Program

Last Date of attendance: _____

Reason for going inactive: _____

Inactive status is granted for up to 8 weeks. A \$10.00 reactivation fee is required to reactivate your status.

Printed Name of Parent/Guardian

Signature of Parent/Guardian

Parent/Guardian Phone #