**ACCUEIL DE LOISIRS**

**Feuille d’inscription : Mercredis de janvier à avril 2019**

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| **Nom et prénom de l’enfant : …………………………………………………………………** | | | | | | | | | | | |
| Année de naissance | Jour : | | Mois : | | | | | Année : | | | |
| Niveau scolaire | PSM | MSM | | GSM | CP | CE1 | CE2 | | CM1 | CM2 | 6ème |

**Pré-requis à l’inscription** : Avant de remplir cette feuille d’inscription, vous devez avoir obligatoirement transmis au service Enfance-Loisirs, une fiche de renseignements concernant l’enfant, dûment complétée.

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| **PRESTATIONS :** |
| **\* A / DJM = 7h30-12h / Demi-Journée Matin sans restauration** |
| **\* B / J = 7h30-19h / Journée** |
| **\* C / MR = 7h30-13h30 / Matin avec restauration** |
| **\* D / AMR = 12h-19h Après-Midi avec restauration** |
| **\* E / DJAM = 13h30-19h / Demi-Journée Après-Midi sans restauration** |

**🡲 Inscription et désistement : Les inscriptions et les désistements doivent parvenir au plus tard le mercredi précédent**

**Cochez les dates des présences et les prestations souhaitées.**

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| **Janvier** | | | | | **9** | | | | | **16** | | | | | **23** | | | | | **30** | | | | |  | | | | |
|  |  |  |  |  | **A** | **B** | **C** | **D** | **E** | **A** | **B** | **C** | **D** | **E** | **A** | **B** | **C** | **D** | **E** | **A** | **B** | **C** | **D** | **E** |  |  |  |  |  |

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| **Février** | | | | | **6** | | | | | **13** | | | | | **20** | | | | |  | | | | |  | | | | |
|  |  |  |  |  | **A** | **B** | **C** | **D** | **E** | **A** | **B** | **C** | **D** | **E** | **A** | **B** | **C** | **D** | **E** |  |  |  |  |  |  |  |  |  |  |

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| **Mars** | | | | | **13** | | | | | **20** | | | | | **27** | | | | |  | | | | |  | | | | |
|  |  |  |  |  | **A** | **B** | **C** | **D** | **E** | **A** | **B** | **C** | **D** | **E** | **A** | **B** | **C** | **D** | **E** |  |  |  |  |  |  |  |  |  |  |

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| **Avril** | | | | | **3** | | | | | **10** | | | | | **17** | | | | |  | | | | |  | | | | |
|  |  |  |  |  | **A** | **B** | **C** | **D** | **E** | **A** | **B** | **C** | **D** | **E** | **A** | **B** | **C** | **D** | **E** |  |  |  |  |  |  |  |  |  |  |

**🞏 Votre enfant bénéficie d’un P.A.I « panier repas », cochez la case.**

**Règlement intérieur : je déclare avoir pris connaissance du règlement intérieur**

**🡪Nom et prénom du destinataire de la facturation :** ………………………………………………………………………………………………

**Date et signature :**