



Aquatics Winter Scholarship Cycle

DROP NOTICE

ACTIVE Net Head of Household #: _____

Aquatic Center / Program Name: _____

My child(ren) WILL NOT be attending the checked programs listed below.

Child's Name (LAST, FIRST): _____ Date of Birth: _____

2021 Winter Aquatic Sessions	CLASS TIMES				
Session 1: 12/6/21 - 12/17/21	<input type="checkbox"/> 10:00 am - 10:45 am	<input type="checkbox"/> 4:00 pm - 4:45 pm	<input type="checkbox"/> 5:00 pm - 5:45 pm	<input type="checkbox"/> 6:00 pm - 6:45 pm	<input type="checkbox"/> 7:00 pm - 7:45 pm
Session 2: 1/10/22 - 1/21/22	<input type="checkbox"/> 10:00 am - 10:45 am	<input type="checkbox"/> 4:00 pm - 4:45 pm	<input type="checkbox"/> 5:00 pm - 5:45 pm	<input type="checkbox"/> 6:00 pm - 6:45 pm	<input type="checkbox"/> 7:00 pm - 7:45 pm
Session 3: 1/24/22 - 2/4/22	<input type="checkbox"/> 10:00 am - 10:45 am	<input type="checkbox"/> 4:00 pm - 4:45 pm	<input type="checkbox"/> 5:00 pm - 5:45 pm	<input type="checkbox"/> 6:00 pm - 6:45 pm	<input type="checkbox"/> 7:00 pm - 7:45 pm
Session 4: 2/5/22 - 2/18/22	<input type="checkbox"/> 10:00 am - 10:45 am	<input type="checkbox"/> 4:00 pm - 4:45 pm	<input type="checkbox"/> 5:00 pm - 5:45 pm	<input type="checkbox"/> 6:00 pm - 6:45 pm	<input type="checkbox"/> 7:00 pm - 7:45 pm
Saturday Session: 12/11/21 - 2/26/22	<input type="checkbox"/> 9:00 am - 9:45 am	<input type="checkbox"/> 10:00 am - 10:45 am	<input type="checkbox"/> 11:00 am - 11:45 am	<input type="checkbox"/> 1:00 pm - 1:45 pm	

Child's Name (LAST, FIRST): _____ Date of Birth: _____

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Saturday Session: 12/11/21 - 2/26/22	<input type="checkbox"/> 9:00 am - 9:45 am	<input type="checkbox"/> 10:00 am - 10:45 am	<input type="checkbox"/> 11:00 am - 11:45 am	<input type="checkbox"/> 1:00 pm - 1:45 pm	

I am releasing the scholarship subsidy for the above checked program(s) for my child(ren). I am submitting notification two weeks before the start of the program(s) to Email@parks.lacounty.gov or to front desk staff.

Parent/Guardian Print Name

Parent/Guardian Signature

Date

Site Staff Name (PRINT) : _____ Date: _____ (Email to the appropriate Personnel)