**Planning contrat en selon horaire**

**CRECHE**

Fréquentation mensuelle 2025

**JANVIER**

**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 | **Fermé** | | | | | | | |
| Jeudi 2 |  |  |  |  |  |  | |  |
| Vendredi 3 |  |  |  |  |  |  | |  |
|  |  | | | | | | | |
| Lundi 6 |  |  |  |  |  |  | |  |
| Mardi 7 |  |  |  |  |  |  | |  |
| Mercredi 8 |  |  |  |  |  |  | |  |
| Jeudi 9 |  |  |  |  |  |  | |  |
| Vendredi 10 |  |  |  |  |  |  | |  |
|  |  | | | | | | | |
| Lundi 13 |  |  |  |  |  |  | |  |
| Mardi 14 |  |  |  |  |  |  | |  |
| Mercredi 15 |  |  |  |  |  |  | |  |
| Jeudi 16 |  |  |  |  |  |  | |  |
| Vendredi 17 |  |  |  |  |  |  | |  |
|  |  | | | | | | | |
| Lundi 20 |  |  |  |  |  |  | |  |
| Mardi 21 |  |  |  |  |  |  | |  |
| Mercredi 22 |  |  |  |  |  |  | |  |
| Jeudi 23 |  |  |  |  |  |  | |  |
| Vendredi 24 |  |  |  |  |  |  | |  |
|  |  | | | | | | | |
| Lundi 27 |  |  |  |  |  |  | |  |
| Mardi 28 |  |  |  |  |  |  | |  |
| Mercredi 29 |  |  |  |  |  |  | |  |
| Jeudi 30 |  |  |  |  |  |  | |  |
| Vendredi 31 |  |  |  |  |  |  | |  |