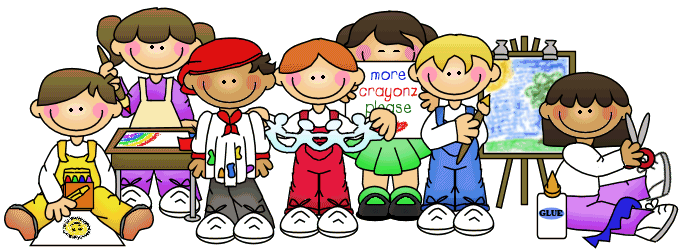
**A black oval with red and white logo

AI-generated content may be incorrect.DEMANDE DE SERVICE DE GARDE SUR PLACE**

**(En lettres moulées svp)**

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| **NOM DE LA PERSONNE DÉLÉGUÉE :** |
| **SECTION LOCALE:** |
| **ADRESSE:** |
| **VILLE: PROVINCE:** |
| **CODE POSTAL:** |
| **TÉLÉPHONE Domicile: Travail:** |
| **TÉLÉCOPIEUR: COURRIEL:** |

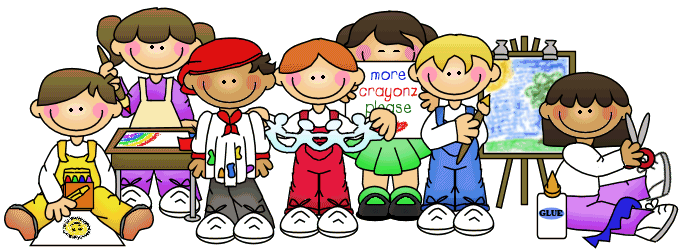
|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **NOM DE L’ ENFANT** | **ÂGE**  **DATE DE NAISSANCE** | **LANGUES PARLÉES** | | | | | **ALLERGIES** | **BESOINS PARTICULIERS**  **(alimentaires, médicaux, etc.)** |
| **Anglais** | | **Français** | | **Les deux** |
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**\*Les heures d’ouverture du service de garde sont de 9 heures à 18 heures.**

**\*Les parents doivent prendre leurs enfants pendant l’heure du repas du midi.**

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| **AUTRES RENSEIGNEMENTS PARTICULIERS:** |
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| **CE FORMULAIRE DÛMENT COMPLÉTÉ DOIT ÊTRE REÇU AU PLUS TARD TRENTE (30) JOURS AVANT L’ASSEMBLÉE GÉNÉRALE.**  **Faire parvenir par la poste à : CSHNB SCFP 1252**  96 Ave Norwood, Suite 302  Moncton, N.-B. E1C 6L9  **Faire parvenir par courriel à** [**nbchu1252@gmail.com**](mailto:nbchu1252@gmail.com) |

**A black oval with red and white logo

AI-generated content may be incorrect.APPLICATON FOR ON-SITE CHILD CARE** 

**(Please print)**

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| --- |
| **NAME OF DELEGATE:** |
| **LOCAL UNION NUMBER:** |
| **ADDRESS:** |
| **CITY: PROVINCE:** |
| **POSTAL CODE:** |
| **TELEPHONE – HOME : WORK:** |
| **FAX: E-MAIL:** |

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| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **NAME OF CHILD(REN)** | **AGE**  **DATE OF BIRTH** | **LANGUAGE SPOKEN** | | | | | **ALLERGIES** | **SPECIAL NEEDS (Diet, medical, etc.)** |
| **English** | | **French** | | **Both** |
|  |  |  |  | |  | |  |  |
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**\*CHILDCARE HOURS ARE FROM 9:00 AM – 6:00 PM**

**\*PARENTS ARE RESPONSIBLE FOR PICKING UP THEIR CHILD AT LUNCH TIME**

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| **OTHER SPECIAL INFORMATION:** |
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|  |
| **THIS FORM MUST BE RECEIVED NO LATER THAN THIRTY (30) DAYS PRIOR TO THE CONVENTION DATE**  **Send to:** NBCHU CUPE Local 1252  96 Norwood Ave, Suite 302  Moncton, NB E1C 6L9  **Email to:** [nbchu1252@gmail.com](mailto:nbchu1252@gmail.com) |