Заведующему МБДОУ д/с 9

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                                                                                   от\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

                                                                                    \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Паспортные данные \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

                                                                      проживающего по адресу\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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                                                                            контактный телефон

Заявление

Прошу Вас сохранить место за моим ребенком \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(Ф.И.О. ребенка, дата его рождения, возрастная группа)

по причине \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

с «\_\_\_\_»\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ 20\_\_г. по «\_\_\_\_» \_\_\_\_\_\_\_\_\_\_\_\_\_\_ 20\_\_г.

Ответственность за жизнь и здоровье моего ребенка на период отсутствия беру на себя.

Дата \_\_\_\_\_\_\_\_\_\_\_\_\_\_                                                    Подпись\_\_\_\_\_\_\_\_\_\_\_