

INSCRIPTION VACANCES / URLAUB ANMELDUNG
MOIS / MONAT
Septembre / September 2026
ENFANT / KIND

Nom / Name : _____

Prénom / Vorname : _____

 Carte chèque service accueil ? oui non

 Titulaire de classe / Lehrer(in) : _____
 (si connu / falls bekannt)

 Cycle / Zyklus : 1 2 3 4

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|----------------|
| Sep 26 |
| DE/A - VON/BIS |
| LU/MO 31.08 |
| MA/DI 01.09 |
| ME/MI 02.09 |
| JE/DO 03.09 |
| VE/FR 04.09 |

| MATIN/MORGEN | | | |
|--------------|-------------|--------------|-------------|
| 6.30-7.00 | 7.00 - 8.00 | 8.00 - 10.00 | 10.00-12.00 |
| X | X | X | X |
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| MIDI/MITTAG |
| 12.00-14.00 |
| X |
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| APRES-MIDI/NACHMITTAG | | | |
|-----------------------|-------------|-------------|--|
| 14.00-16.00 | 16.00-18.00 | 18.00-19.00 | |
| X | X | X | |
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| Sep 26 |
| DE/A - VON/BIS |
| LU/MO 07.09 |
| MA/DI 08.09 |
| ME/MI 09.09 |
| JE/DO 10.09 |
| VE/FR 11.09 |

| MATIN/MORGEN | | | |
|--------------|-------------|--------------|-------------|
| 6.30-7.00 | 7.00 - 8.00 | 8.00 - 10.00 | 10.00-12.00 |
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| MIDI/MITTAG |
| 12.00-14.00 |
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| APRES-MIDI/NACHMITTAG | | | |
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| Sep 26 |
| DE/A - VON/BIS |
| LU/MO 14.09 |
| MA/DI 15.09 |
| ME/MI 16.09 |
| JE/DO 17.09 |
| VE/FR 18.09 |

| MATIN/MORGEN | | | |
|--------------|-------------|--------------|-------------|
| 6.30-7.00 | 7.00 - 8.00 | 8.00 - 10.00 | 10.00-12.00 |
| | | | |
| X | X | X | X |
| X | X | X | X |
| X | X | X | X |

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| MIDI/MITTAG |
| 12.00-14.00 |
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| X |
| X |
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| APRES-MIDI/NACHMITTAG | | | |
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| 14.00-16.00 | 16.00-18.00 | 18.00-19.00 | / |
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| X | X | X | X |
| X | X | X | X |
| X | X | X | X |

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| Sep 26 |
| DE/A - VON/BIS |
| LU/MO 21.09 |
| MA/DI 22.09 |
| ME/MI 23.09 |
| JE/DO 24.09 |
| VE/FR 25.09 |

| MATIN/MORGEN | | | |
|--------------|-------------|--------------|-------------|
| 6.30-7.00 | 7.00 - 8.00 | 8.00 - 10.00 | 10.00-12.00 |
| X | X | X | X |
| X | X | X | X |
| X | X | X | X |
| X | X | X | X |
| X | X | X | X |

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| MIDI/MITTAG |
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| X |
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| APRES-MIDI/NACHMITTAG | | | |
|-----------------------|-------------|-------------|---|
| 14.00-16.00 | 16.00-18.00 | 18.00-19.00 | / |
| X | X | X | X |
| X | X | X | X |
| X | X | X | X |
| X | X | X | X |
| X | X | X | X |

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|----------------|
| Sep 26 |
| DE/A - VON/BIS |
| LU/MO |
| MA/DI |
| ME/MI |
| JE/DO |
| VE/FR |

| MATIN/MORGEN | | | |
|--------------|-------------|--------------|-------------|
| 6.30-7.00 | 7.00 - 8.00 | 8.00 - 10.00 | 10.00-12.00 |
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| MIDI/MITTAG |
| 12.00-14.00 |
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| X |

| APRES-MIDI/NACHMITTAG | | | |
|-----------------------|-------------|-------------|---|
| 14.00-16.00 | 16.00-18.00 | 18.00-19.00 | / |
| X | X | X | X |
| X | X | X | X |
| X | X | X | X |
| X | X | X | X |
| X | X | X | X |

Fait à / Erstellt in _____

le / am _____

Parents / Elteren _____

Responsable légal / Erziehungsberechtigter _____

Tuteur / Vormund _____

Signatures des personnes ayant l'autorité parentale / Unterschrift der Erziehungsberechtigten

**LA PRESENTE FICHE EST A RENVoyer AU PLUS TARD LE 29.05.2026 / DIESES FORMULAR IST BIS SPÄTESTENS ZUM 29.05.2026
 A LA MAISON RELAIS / AN DIE MAISON RELAIS REISDORF ZURÜCKZUSENDEN.
 Adresse : 14, route de Larochette L-9391 REISDORF Tel. : 26 87 69 61 Fax : 26 87 83 36 E-mail : mr.reisdorf@arcus.lu**