SIGN IN/SIGN OUT

Name of Child Care Facility:_____

TODAY'S DATE: (Month, day and Year):	ATTENTION PARENTS! We are required to ensure that each child is signed in and signed out every day. Please help by taking a minute to sign in your child and sign out and PLEASE note the time. You're cooperation is appreciated.			
Print Child's Name	Time of Arrival	Signature of Person Dropping Child Off	Time Picked Up	Signature of Person Picking Up Child