

MONTH: _____

SIGN IN/OUT RECORD

	Child's Name			Child's Name			Child's Name			Child's Name			Child's Name			Child's Name			Child's Name			Child's Name		
Time	In	out	Int	In	out	Int	In	out	Int	In	out	Int	In	out	Int	In	out	Int	In	out	Int	In	out	Int
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Parents/guardian must sign children in/out daily and initial each day