For the week of: _	, 20	0,

Day	Sign-In Time	Parent/Guardian's Name	Signature	Sign-Out Time	Parent/Guardian's Name	Signature
Monday						
Tuesday						
Wednesday						
Thursday						
Friday						

Child's Name:

Day	Sign-In Time	Parent/Guardian's Name	Signature	Sign-Out Time	Parent/Guardian's Name	Signature
Monday						
Tuesday						
Wednesday						
Thursday						
Friday						

Child's Name:

Day	Sign-In Time	Parent/Guardian's Name	Signature	Sign-Out Time	Parent/Guardian's Name	Signature
Monday						
Tuesday						
Wednesday						
Thursday						
Friday						

Child's Name:

Day	Sign-In Time	Parent/Guardian's Name	Signature	Sign-Out Time	Parent/Guardian's Name	Signature
Monday						
Tuesday						
Wednesday						
Thursday						
Friday						

Child's Name:

H Jav	Sign-In Time		Parent/Guardian's Name	Signature
Monday				
Tuesday				
Wednesday				
Thurw3W nI	3 y			
				_

Date:

Sign-In and Sign-Out Sheet

#	Sig	n-In	Sign	ı-Out
	Youth Participant Name	Parent/Guardian Signature	Youth Participant Name	Parent/Guardian Signature
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				
11				
12				
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20 21				
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22 23		+		
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31				
32				
33				
55		<u> </u>	<u> </u>	1

Sign-In Sheet

Sign-Out Sheet

	•	1911 111				O I ;	gii Gat	01100	.
Date	Child's Name	Parent's Name	E-mail Address	Phone Number D	Date	Child's Name	Parent's Name	E-mail Address	Phone Number

Phone Documentation Form

		imary Caregiver(s))	
*Anyone not a Parent, th	at will be able to pick up y	our child *	
Adult #1 Name		Relation to child	
		Cell:	
Adult #2 Name		Relation to child	
		Cell:	
Adult #3 Name		Relation to child	
		Cell:	
Adult #4 Name		Relation to child	
		Cell:	
Adult #5 Name		Relation to child	
		Cell:	

Parent's Contact Information

Parent's Name	Child's Name	E-mail Address	Phone Number

Attendance Record

Name of Youth F	Partio	cipar	nt		Ger	nder	Birt	h Da	ite	Eve	nt N	ame	•																		
Name of Parent of	or Gu	ıardi	an			Rel	l ation	ship				Work Number					Hor	ne N	lumb	er			Cel	l Nu	mbe	r					
Name of Parent of	or Gu	ıardi	an	Relationship						Work Number						Hor	ne N	lumt	er			Cel	l Nu	mbe	r						
Emergency Conta	rgency Contact # 1 Relationship								Work Number							Home Number					Cell Number										
Emergency Conta	Emergency Contact # 2 Relatio				ation	ship				Wo	rk N	umb	er			Home Number						Cell Number									
Emergency Conta	act #	: 3				Rel	ation	ship				Wo	rk N	umb	er			Hor	ne N	lumb	er			Cel	l Nu	mbe	r				
										P =	- Par	ent;	EC =	= Em	erge	encv	Con	tact													
Month	1	2	3	4	5	6	7	8	9	10		12	13	_		16		18	19	20	21	22	23	24	25	26	27	28	29	30	31
Arrived Time																															
Parent/Guardian																															
/Emergency																															
Contact Initial																															
Departed Time																															
Parent/Guardian																															
/Emergency																															
Contact Initial																															

Sign-In Parent/Guardian' Signature s Name Day