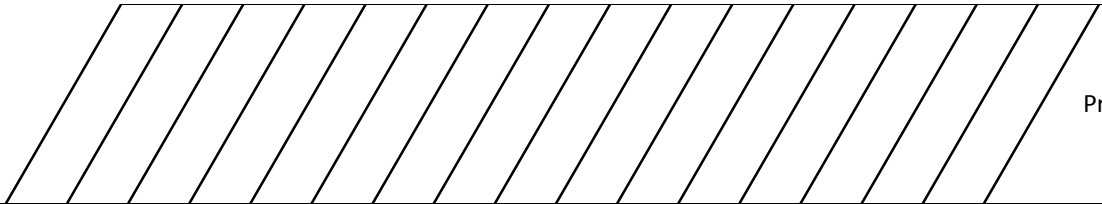


Day: _____ Date: _____



Program: _____

Arrive	Depart	DOB	Child's Name																OUT	WITH	IN	OUT	WITH	IN
				1																				
				2																				
				3																				
				4																				
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Out					I																			
Count																								
In					C																			
Count																								
Out					C																			
Count																								
In					C																			
Count																								
Out					C																			
Count																								

Notes: _____

T – Total
 I – Initials
 C – Change
 X – Present
 O – Out
 -- Out for the Day