

Head Start Daily Sign-in/Sign-out

Site:			Date:		Pick-up Information
Child's Name	Time	Sign-in signature	Time	Sign-out signature	
1.					
2.					
3.					
4.					
5.					
6.					
7.					
8.					
9.					
10.					
11.					
12.					
13.					
14.					
15.					
16.					
17.					
18.					