

## **Daily Child Schedule**

Child(ren)'s Name(s)					
Dear parent or guardian, In order to better serve you, we ne	ed your child(ren)'s anticipated dai	ly attendance schedule			
	Start time	Pickup time			
Monday					
Tuesday					
Wednesday					
Thursday					
Friday					
Comments					
arent Signature Date					
Dear parent or guardian,	Daily Schedule  ed your child(ren)'s anticipated dai				
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