

**PARENTS/GUARDIANS:** Please document the TIME and provide your FIRST & LAST NAME and SIGNATURE each time your child is dropped off and picked up.

**PROVIDER:** Please use one sign-in/sign-out sheet per day for every 24 hour period. (Multiple pages can be used if necessary)

- | Instructions |  |
|--------------|--|
| •            | Everyone enrolled is on 1 sign in/sign out sheet, including Best Beginnings children.  |
| •            | Parents are not able to sign in advance.   |
| •            | Parents must sign with an entire signature; initials will not be accepted.   |
| •            | If due to parents' omission, provider can sign for the drop-off, but parent must sign for pick up at the end of the day.               |
| •            | If a child <u>leaves</u> the facility and returns <u>at any time</u> , they should be entered on a new line with the time they arrive. |

Day Date

Business Name

Child's Last Name	Child's First Name	IN	Signature	OUT	Signature
1.		: AM / PM		: AM / PM	
2.		: AM / PM		: AM / PM	
3.		: AM / PM		: AM / PM	
4.		: AM / PM		: AM / PM	
5.		: AM / PM		: AM / PM	
6.		: AM / PM		: AM / PM	
7.		: AM / PM		: AM / PM	
8.		: AM / PM		: AM / PM	
9.		: AM / PM		: AM / PM	
10.		: AM / PM		: AM / PM	
11.		: AM / PM		: AM / PM	
12.		: AM / PM		: AM / PM	
13.		: AM / PM		: AM / PM	
14.		: AM / PM		: AM / PM	
15.		: AM / PM		: AM / PM	
16.		: AM / PM		: AM / PM	