

Grace Kids Weekly Sign-in Form

Name _____

Date _____

Parents' Names _____

Claim # _____

Parents will be where? 9:15 - _____ 11:00 - _____

Special Instructions (feedings, breastfed, naps, etc.)

During the service...

I was changed at _____ (dry/wet/dirty).

I slept from _____ to _____.

I was changed at _____ (dry/wet/dirty).

I ate at _____ (all/most/none).

I was changed at _____ (dry/wet/dirty).

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