

**CHILD ARRIVAL-DEPARTURE  
5-DAY WEEK**

Child's Name	Date:			Date:			Date:			Date:			Date:		
	Monday			Tuesday			Wednesday			Thursday			Friday		
	Arrival	Depart	<input type="checkbox"/> Bus	Arrival	Depart	<input type="checkbox"/> Bus	Arrival	Depart	<input type="checkbox"/> Bus	Arrival	Depart	<input type="checkbox"/> Bus	Arrival	Depart	<input type="checkbox"/> Bus
			<input type="checkbox"/> P/U			<input type="checkbox"/> P/U			<input type="checkbox"/> P/U			<input type="checkbox"/> P/U			<input type="checkbox"/> P/U
	P/U Name:														
	Arrival	Depart	<input type="checkbox"/> Bus	Arrival	Depart	<input type="checkbox"/> Bus	Arrival	Depart	<input type="checkbox"/> Bus	Arrival	Depart	<input type="checkbox"/> Bus	Arrival	Depart	<input type="checkbox"/> Bus
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