

NEW CARE ASSOCIATES

PARENT SIGNATURE SHEET

CHILD'S NAME Yasael Luciano

STAFF MEMBER'S
NAME NINA KAE HERNANDEZ SIGNATURE Nina Kae Hernandez

| DAY | DATE Of Service | TIME: Start to End | | Parent Signature |
|-----------|-----------------------|-----------------------|--------|------------------|
| MONDAY | | | | |
| TUESDAY | 7/31/18 | 2:00PM | 5:00PM | Yajaira Romirez |
| WEDNESDAY | 8/1/18 | 2:00PM | 5:00PM | Yajaira Romirez |
| THURSDAY | 8/2/18 | 2:00PM | 6:00PM | Yajaira Romirez |
| FRIDAY | | | | |
| SATURDAY | | | | |
| SUNDAY | | | | |

TOTAL HOURS 10