NEW CARE ASSOCIATES

PARENT SIGNATURE SHEET

CHILD	's NAME Alexzhung	<u>'</u>
STAFF NAME_	MEMBER'S	SIGNATURE Nancy Cones

DAY	DATE Of	TIME: Start to End		Parent Signature
	Service			
MONDAY				×
TUESDAY	6/12/18	37,30	5:30	02
WEDNESDAY	(e/13/18	3:30	5.30	. 02
THURSDAY	6/14/18	3:30	5:30	OZ
FRIDAY	, , , , ,			~
SATURDAY		1		
SUNDAY		***************************************		

TOTAL HOURS 6