

# Le Jardin Community Center, Inc.

## Sign-In Sheet

Meeting/Training Title: \_\_\_\_\_

Location: \_\_\_\_\_ Duration: \_\_\_\_\_ Given By: \_\_\_\_\_

	Attendee Name	Position	Signature	Date
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				
11				
12				
13				
14				
15				

# Le Jardin Community Center, Inc.

## Sign-In Sheet

16				
----	--	--	--	--

	Attendee Name	Position	Signature	Date
17				
18				
19				
20				
21				
22				
23				
24				
25				
26				
27				
28				
29				
30				
31				
32				