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|  |  | | | | | **Sign Up Sheet** | | | |  |
|  | | SCHOOL NAME | | | | |  | DATE |  | |
|  | | **<School Name>** | | | | |  | **Mm/dd/yyyy** |  | |
|  | | ADDRESS | | | | |  | CONTACT NUMBER |  | |
|  | | **<School Address>** | | | | |  | **<Contact Number** |  | |
|  | | | | | | | | | | |
|  | | **Child Name** | **Parent/Guardian Name** | **Contact Number** | **Address** | | | |  | |
|  | | John Smith | Linda Smith | 1 47-8335-3466 | Columbia Heights, Washington DC | | | |  | |
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