

tidymighty

Babysitting Checklist

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Name:	Age:
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Name:	Age:
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Where We're Going

Location:	
Address:	
Phone Number:	Cell:
Date/Time Expected/Hours:	E-Mail:

Instructions

Meals & Snacks:
Allergies:
Medications:
Play Schedule:
Favorite Toys/Games:
Other:

Additional Information

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