

**GIRL SCOUTS OF SAN JACINTO COUNCIL
SIGN-IN SHEET**

One sign in sheet per service unit

COURSE NUMBER _____

Course Name: _____ Date(s): _____ Location: _____

Trainer: _____ Hours: _____ Trainer: _____ Hours: _____

Trainer: _____ Hours: _____ Trainer: _____ Hours: _____

PLEASE PRINT CLEARLY

Participant Full Name	Address, City and Zip	Service Unit	Phone Number/Email
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