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Little Rosie’s Nursery School Parent’s Evening Log

Please sign your child’s name below on the selected date and **15-minute** time slot that you would like to attend parent’s evening with your child’s key person which will last.

|  |  |
| --- | --- |
| **Time:** | **Child’s Name:** |
| **9.30am** |  |
| **9.45am**  |  |
| **10.00am** |  |
| **10.15am** |  |
| **10.30pm** |  |
| **10.45pm** |  |
|  |
| **1.30pm** |  |
| **1.45pm** |  |
| **2.00pm** |  |
| **2.15pm** |  |

 **Monday 15th October** **Tuesday 16th October**

|  |  |
| --- | --- |
| **Time:** | **Child’s Name:** |
| **1.30pm** |  |
| **1.45pm**  |  |
| **2.00pm** |  |
| **2.15pm** |  |

 **Thursday 18th October**

|  |  |
| --- | --- |
| **Time:** | **Child’s Name:** |
| **9.30am** |  |
| **9.45am**  |  |
| **10.00am** |  |
| **10.15am** |  |
| **10.30am** |  |
| **10.45am** |  |



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