Youth Movement Log

(Drop off at The Pointe Welcome Desk, email (matt.struemph@ballwin.mo.us) or fax to 636.207.2330 attention: Matt Struemph)

Name:_____ Age:____ Parent's Name(s):_____

Phone:_____ E-mail:_____

DATE	BRIEF ACTIVITY DESCRIPTION	TIME (MIN)	PARENT'S INITIALS

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