## Daily Client Check-in Sheet



Client Name	Client Description (i.e. red shirt)	Seat #	Notes (i.e. running late/ early arrival/ requested Therapist)	Room #	MA Initials	Note Completed

## Daily Client Check-in Sheet



Client Name	Client Description (i.e. red shirt)	Seat #	Notes (i.e. running late/ early arrival/ requested Therapist)	Room #	MA Initials	Note Completed