



**Buffalo Public Schools  
Elementary Education Department  
Parent Meeting Sign-in Sheet**

Teacher:	Event:
Date:	School:
Parent/Guest Name	Child's Name
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- **PARENT INVITATION OR FLYER MUST BE ATTACHED TO THIS SIGN-IN SHEET**
- **Send To: PreK Office at School #99, Room 268P (1095 Jefferson Avenue, 14208) or FAX to 888-2013**