

FACILITY VISIT

Facility Name: Pinedale Aquatic Center

Date: 04/29/2019

Time: 10:00

Provider: _____

Certificate #: 002364

Phone: 307-367-2832

Address: 535 N. Tyler

City: Pinedale

Facility Type: ____ FCCH ☒ FCCC ____ CCC

Comments/TA Provided:

Two children present with one staff. The room is very clean and organized. Lots of choices for the children.

Director/Provider: _____

Date: _____

Childcare Licensors: _____

Date: _____