


May 2020

Spring

Provider Name: _____

Date of Fire Drill: _____

Meeting- **No meeting**

SUNDAY	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY
					1 Activity _____ Target: _____ Outdoor: _____ Off Site: _____	2
3	4 Activity _____ Target: _____ Outdoor: _____ Off Site: _____	5 Activity _____ Target: _____ Outdoor: _____ Off Site: _____	6 Activity _____ Target: _____ Outdoor: _____ Off Site: _____	7 Activity _____ Target: _____ Outdoor: _____ Off Site: _____	8 Activity _____ Target: _____ Outdoor: _____ Off Site: _____	9
10 MOTHER'S DAY	11 Activity _____ Target: _____ Outdoor: _____ Off Site: _____	12 Activity _____ Target: _____ Outdoor: _____ Off Site: _____	13 Activity _____ Target: _____ Outdoor: _____ Off Site: _____	14 Activity _____ Target: _____ Outdoor: _____ Off Site: _____	15 Activity _____ Target: _____ Outdoor: _____ Off Site: _____	16
17	18 CLOSURE DAY <i>Victoria Day</i>	19 Activity _____ Target: _____ Outdoor: _____ Off Site: _____	20 Activity _____ Target: _____ Outdoor: _____ Off Site: _____	21 Activity _____ Target: _____ Outdoor: _____ Off Site: _____	22 Activity _____ Target: _____ Outdoor: _____ Off Site: _____	23
24/31	25 Activity _____ Target: _____ Outdoor: _____ Off Site: _____	26 Activity _____ Target: _____ Outdoor: _____ Off Site: _____	27 Activity _____ Target: _____ Outdoor: _____ Off Site: _____	28 Activity _____ Target: _____ Outdoor: _____ Off Site: _____	29 Activity _____ Target: _____ Outdoor: _____ Off Site: _____	30