

# Activities & Social Experiences

Date form completed:	Revised:	Initials:
By whom:	Revised:	Initials:

Name of child:	Birth date:
Home address:	Phone:
Parent/Guardian:	Home/Work phone:

<b>Favorite TV shows/movies</b>

<b>Hobbies/activities (inside the home)</b>

<b>Leisure activities/clubs (e.g., scouts, church group, sports):</b>		
<b>Name of activity/club:</b>	<b>Contact person:</b>	<b>Phone:</b>

Activities your child enjoys:


Activities your child does *not* enjoy:


Other important information:
