

# Child Information Sheet

Child's name \_\_\_\_\_

Birth date \_\_\_\_\_

Child's home phone number \_\_\_\_\_

Child's home address \_\_\_\_\_

Father's name \_\_\_\_\_

Address (if different from child) \_\_\_\_\_

Mother's name \_\_\_\_\_

Address (if different from child) \_\_\_\_\_

Family e-mail address \_\_\_\_\_

Siblings (names/ages) \_\_\_\_\_

Others in home \_\_\_\_\_

Father's occupation/workplace \_\_\_\_\_

Mother's occupation/workplace \_\_\_\_\_

Pets (and their names) \_\_\_\_\_

Food allergies? \_\_\_\_\_

Other allergies? \_\_\_\_\_

Special health needs? \_\_\_\_\_

Fears? \_\_\_\_\_

What are your child's favorite activities? \_\_\_\_\_

What are your child's likes and dislikes? \_\_\_\_\_

Are there other things we should know about your child? \_\_\_\_\_