



Child's full name _____

Name child goes by _____

Address & city _____

Phone _____ Birthdate _____ F _____ M _____

Mother/Guardian name _____

Cell _____ Home # _____ E-mail _____

Mother/Guardian address & city _____

Mother/Guardian employer/occupation _____

Work phone _____

Father/Guardian Name _____

Cell _____ Home # _____ E-mail _____

Father/Guardian address & city _____

Father/Guardian employer/occupation _____

Work phone _____

Church preference/home church _____

Custody/visitation arrangements (if applicable) _____

Siblings (please indicate ages and whether or not they live with the child) _____

Allergies and/or special medical issues _____

Special food or eating instructions _____

Has your child had previous group/preschool experience? Describe: _____

Briefly describe your child's personality _____

Fears _____

Additional information such as special interests, discipline, child's communication, comforting, and/or stresses in their life, (new baby, divorce, moved recently, death in the family, etc.) that we should be aware of

Persons (other than parents/guardians) to be notified in case of emergency:

1. Name _____ Home phone _____

Cell phone _____ Work phone _____

Relationship to child _____

2. Name _____ Home phone _____

Cell phone _____ Work phone _____

Relationship to child _____

Child's physician _____ phone _____

Names of persons other than parent/guardian to whom child may be released:

Name	Cell	Work/Home Phone
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____
4. _____	_____	_____