

2010 – 2011 CHILDREN’S PROFILE

This profile is to help teachers better know your child. Please add any information that you believe would be of benefit in your child’s care and comfort.

Name _____ Name used in home _____

Address _____

Subdivision _____ Birthday _____

Mother _____ Telephone _____

Cell/Pager _____

Father _____ Telephone _____

Cell/Pager _____

E mail address _____

Transportation Arrangements: (Carpool etc.) Permission is given to the following people to pick up my child. **CHILDREN WILL NOT BE RELEASED TO ANY OTHER PERSONS WITHOUT WRITTEN PERMISSION FROM A PARENT.**

1. Name _____ Phone _____

2. Name _____ Phone _____

3. Name _____ Phone _____

Children will experience a cooking time on some days. We have a lot of birthday celebrations and party days also. If there is any food that you prefer your child not to eat, please list. _____

Is your child subject to any food allergies? _____

Illnesses, allergies, asthma or physical challenges:

Eating Habits _____

Fears _____ Favorite Play Activity _____

Brothers & Sisters:

Name _____ Age _____

Name _____ Age _____

Name _____ Age _____

Pets _____

Others in Home _____

Special words to indicate needs: _____

Code Word: _____

Additional Helpful Information:

