

Children's Information Sheet

Date _____

Personal Information

Child's full name _____

Name you use to address your child _____ Child's date of Birth _____

Mailing address _____

Home address (if different from mailing address) _____

Phone number _____ E-mail _____

With whom does the child live? (parents, guardians, other adults)

Name _____ Relationship _____

Name _____ Relationship _____

List of siblings

Name _____ Age _____ Do they live with child? _____

Name _____ Age _____ Do they live with child? _____

Name _____ Age _____ Do they live with child? _____

Name _____ Age _____ Do they live with child? _____

Medical Information

List any allergies _____

List any medical information that your child's teacher should know _____

Security Information

If your security pass should be misplaced, who has permission to pick up your child? _____

Is there anyone that should **not** pick up your child? _____

Are there any custody arrangements of which the leaders should be aware? _____

In case of an emergency and a parent/legal guardian cannot be reached, whom should we contact?

Name _____ Phone _____ Relationship _____

Special Instructions or Information