Child’s Name__________________________________________

What are your child’s favorite songs and/or games?

Tell us about your child’s siblings.

Has your child been in a group play situation?

Do you have any pets?

Is your child a good eater? What are his/her favorite foods?

Stage of potty training?

Please tell us about your child’s naptime routine. Does he/she have a comfort item? (pacifier, blanket, etc.) If yes, your child is welcome to bring it with them.

Please tell us anything else about your child that would help us while he/she is in our care.