



## About Your Child:

1. In order for our facilitator to best meet your child/ren's needs please provide us with any information you think may be pertinent, including special dietary needs and/or restrictions; and any food and/or environmental allergies.

2. In order for our facilitator to get to know your child please tell us about him/her.

3. Please let us know if you have other children:

Name: \_\_\_\_\_ Age: \_\_\_\_\_ Grade: \_\_\_\_\_

Name: \_\_\_\_\_ Age: \_\_\_\_\_ Grade: \_\_\_\_\_

Thank you for your kind help

**Please Note:** In an effort to encourage communication among parents, we plan on creating a *Directory* that will be distributed to the parents.

Please mark (✓) the box if you **DO NOT** wish to have your phone #  , address  included. Even though spaces will be provided, the directory **will not** include either email addresses or cell phone numbers.