

# ALL ABOUT ME!

\_\_\_\_\_  
CHILD'S NAME

## BASIC INFORMATION:

BIRTH DATE - \_\_\_\_\_

CURRENT AGE - \_\_\_\_\_

## SCHOOL:

NAME OF SCHOOL CURRENTLY ATTENDING - \_\_\_\_\_

SCHOOL'S ADDRESS - \_\_\_\_\_

GRADE - \_\_\_\_\_

TEACHER - \_\_\_\_\_

FAVORITE SUBJECT - \_\_\_\_\_

LEAST FAVORITE - \_\_\_\_\_

## LIKES & DISLIKES:

LIKES - \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

DISLIKES - \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

## GOALS:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

# BABY SITTER INFORMATION

OUR NAMES: \_\_\_\_\_

OUR ADDRESS: \_\_\_\_\_

WE CAN BE REACHED AT: \_\_\_\_\_

## EMERGENCY NUMBERS:

POLICE - \_\_\_\_\_

FIRE - \_\_\_\_\_

HOSPITAL - \_\_\_\_\_

POISON CONTROL - \_\_\_\_\_

PEDIATRICIAN NAME - \_\_\_\_\_

NUMBER - \_\_\_\_\_

## CHILDREN

NAME	AGE	ALLERGIES
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## INSTRUCTIONS

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OTHER IMPORTANT INFO: \_\_\_\_\_

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