



Child's Name _____

Child's Preferred Name: _____

Parent/Guardian Name(s) _____

Daytime phone number _____

Evening phone number _____

Other phone numbers? _____

Email _____



The best way to contact me is by:

- phone (day/evening) email notes sent home

Does your child have access to a computer at home? _____

Does your child have access to the internet at home? _____

What special interests, sport activities, and/or hobbies does your child have?

Please list any food/product allergies your child has:

What three words best describe your child:

Are there any special comments you would like to make?

****Please return with your child on the first day of school.****

Thank you so much for taking the time to fill this out.