

# Getting to Know You

Childs Name: \_\_\_\_\_ Nickname: \_\_\_\_\_

Birthday: \_\_\_\_\_

Is your child allowed to celebrate all holidays? \_\_\_\_\_ If not please be specific of what is not allowed: \_\_\_\_\_

What Language(s) are spoken at home? \_\_\_\_\_

What Language does your child speak/understand best? \_\_\_\_\_

Child lives with: \_\_\_\_\_

Are there any brothers / sisters? \_\_\_\_\_

Does your child have pets at home? \_\_\_\_\_

Is your child left or right handed? \_\_\_\_\_

Does your child have any dietary restrictions? \_\_\_\_\_

Is your child allergic to anything? \_\_\_\_\_

Does your child have any fears? \_\_\_\_\_

What would you say are your child's strengths? \_\_\_\_\_

How would you describe your child? (circle all that apply)

shy          leader          friendly          stubborn          follower          generous

strong willed          timid          outgoing          introverted

Please let us know any information that you think would help us care for your child: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**Parent's Signature** \_\_\_\_\_ **Date** \_\_\_\_\_