

_____2022-2023

InfantsDaycare.com

148 George Street
Brooklyn, NY 11237

Child's Name: _____ Preferred Name : _____

Birth date: _____ / _____ / _____ Gender: Male / Female

Home Address: _____

City & Zip: _____

Home Phone: (_____) _____ Preferred daytime #: _____

First Parent/Guardian Name: _____

Work Phone: _____ Cell Phone #: _____

Email address: _____

Second Parent/Guardian Name: _____

Work Phone: _____ Cell Phone #: _____

Email address: _____

Emergency Contact # 1 Name: _____

Place of Business: Company Name & Address: _____

Work Phone: _____ Cell Phone #: _____

Email address: _____

Emergency Contact # 2 Name: _____

Place of Business: Company Name & Address: _____

Work Phone: _____ Cell Phone #: _____

Email address: _____

Parents are required to provide adequate supplies of milk/formula/food, & diapers for infants.

Please help us get to know your child by answering the following questions:

List any languages other than English that your child speaks.

Briefly describe your child's personality and temperament.

Briefly describe your child's previous school experiences/organized/group activities.

Is your child able to separate from you comfortably? How have you supported your child with transitions/separations in the past?

What are some of your child's interests?

Is your child receiving any special services? (e.g. speech, occupational, or physical therapy) Any special medical needs or allergies?

Any other information which might assist our daycare in providing optimal child care?