

Child Enrollment Information

Child's Name: _____ DOB: _____

Nickname (if applicable): _____

Elementary School your child will attend (if known): _____

Please take a few minutes to fill out the form below. We believe that you know your child best and sharing information about your child will allow us to interact with your child in a more positive manner and meet his/her individual needs.

What would you like us to know about your child?

What type of activities does your child enjoy doing?

What are your child's favorite toys?

Is this your child's first experience with child care? Please provide details.

With whom does your child reside? Please provide names/relationships.

Are there any custody arrangements that we need to be aware of? If so, please provide documentation.

What language(s) is spoken in your home?

Does your child have any particular fears?

What soothes or comforts your child when he/she is upset?

Does your child have any medical or physical needs? Please explain.

Is there any family history of speech, vision or hearing impairments?

Do you have any concerns about your child's development?

Does your child have an Individualized Education Plan (IEP) or Individualized Family Service Plan (IFSP)? If so, would you please provide a copy to us? We would like to work with you and other professionals to provide the best care for your child. This information will be kept in confidence with only the applicable teachers and Annie's management having access to the information.

Do you have any family or cultural traditions that are important in your home? If so, would you be willing to share these traditions with your child's class?

Thank you for taking the time to help us learn about your child.