

CIRCLE OF FRIENDS CHILD CARE CENTER
 SHIREMANSTOWN UNITED METHODIST CHURCH
 125 East Main Street, Shiremanstown, PA 17011
 Phone : 737-6621 Fax - 761-2391

PARENT AND CHILD INFORMATION

The following information is requested so that we may get to know you and your child better and to also help us in providing the special individualized care you want for your child. Please take a few moments to think about and answer these questions. Your input is not only welcomed; it is an integral part of our relationship and your child's guidance and direction. Not all the questions will apply, but please complete as many as you can. Thank you.

NAME	DOB	PHYSICAL DESCRIPTION
NICKNAMES		
		HEIGHT
		WEIGHT
NAMES AND AGES OF SIBLINGS		HAIR COLOR
		EYE COLOR
		DISTINGUISHING MARKS?

FAVORITES:	DISLIKES:
COLOR	
LETTER	
NUMBER	
FOOD	
FLAVORS	
JUICE	
SODA	
TV SHOWS	
MOVIES	
BOOKS	
ACTIVITIES	
GAMES	
SONGS	
HERO	

WHAT TYPES OF SNACKS WOULD YOU PREFER FOR YOUR CHILD? GIVE EXAMPLES.

WHAT ARE YOUR CHILD'S FAVORITE TOYS?

WHAT CHURCH DO YOU ATTEND?

DO YOU OR YOUR CHILDREN ATTEND SUNDAY SCHOOL?

WHAT WAS YOUR CHILD'S LASTEST BIG ACCOMPLISHMENT?

IS THEIR A PARTICULAR AREA OF DEVELOPMENT IN WHICH YOUR ARE NOW FOCUSING? ie. sharing, patience, potty-training, biting, saying please/thankyou, etc)