



Child's Information Sheet

Child's Name: _____ Date of Birth: _____

I give my permission for the following people to pick up my child from preschool in the event I cannot:

Name: _____ Relationship: _____
Phone: _____ Cell: _____

Name: _____ Relationship: _____
Phone: _____ Cell: _____

Name: _____ Relationship: _____
Phone: _____ Cell: _____

If circumstances change and one or more of these persons are not allowed to pick up your child, please send a note to the school or call the school office, 336-924-4241. You would then need to update this list for your child's file.

Does your child have any special needs? Yes _____ No _____

If yes, please list and explain: _____

Please list anything your child's teacher needs to know to help your child have a wonderful year (any likes, dislikes, fears, etc.) _____
