Little Friends Daycare enrollment
Information and Authorization forms

Developmental Information

Child lives with : Both parents:_____ Mother:_____ Father:____ Other:____

Please fill out the following as it pertains to your child. Please be as specific and detailed as possible.

Is there any information we need to know about your child about behavior, health or otherwise?_____

_____

Eating habits and Schedule:_____

_____

Fears:_____

Toliet Training:_____

_____

Methods of Discipline:_____

_____

Special Words and Meanings::_____

_____

Other Developmental Information: _____

_____

Other Experiences in Daycare: _____

_____

Parents main concerns with Daycare:

_____