Getting to know you...

Child's Name:	Date:
Date of birth:	
Parent's email	
Do you have any goals for your child that we may assist with?	
Is your child potty trained?	
Previous childcare experiences (where)	
Duration of previous childcare:	
Would you like to share your reason for leaving?	
Do you have a family church membership?	
If so, where:	
If not, would you be interested in any information about Our Father's Lutheran Church or Sunday School program? Yes / No	
Is your child baptized? Yes / No If so, what is there baptismal birthday that we may celebrate it with them	
Any other information about your Child you would like us to know?	

Thank you for your time. ©