

All About \_\_\_\_\_@

## The Children's College

Child's Name \_\_\_\_\_ Birthdate: \_\_\_\_\_

Parents: \_\_\_\_\_ Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Address: \_\_\_\_\_

*The information requested is intended for use by program to coordinate volunteer efforts, and plan activities that meet the needs of our center, children, and families.*

<b>THINGS MY CHILD DOES WELL</b>
<b>WHAT MY CHILD LIKES AND DISLIKES</b>
<b>THINGS I AM WORKING ON WITH MY CHILD</b>
<b>FAMILY PAST/PRESENT INVOLVEMENT WITH EARLY CHILDHOOD</b>
<b>MY CHILD ENJOYS THESE PHYSICAL ACTIVITIES</b>

<b>MY CHILD HAD DIFFICULTY WITH THESE ACTIVITIES</b>
<b>MY CHILD WILL NEED THE FOLLOWING EQUIPMENT AND/OR ROUTINES</b>
<b>THINGS MY CHILD NEED HELP WITH</b>
<b>WHAT SPECIAL ADAPTATIONS WILL THE PROGRAM AT THIS TIME?</b>

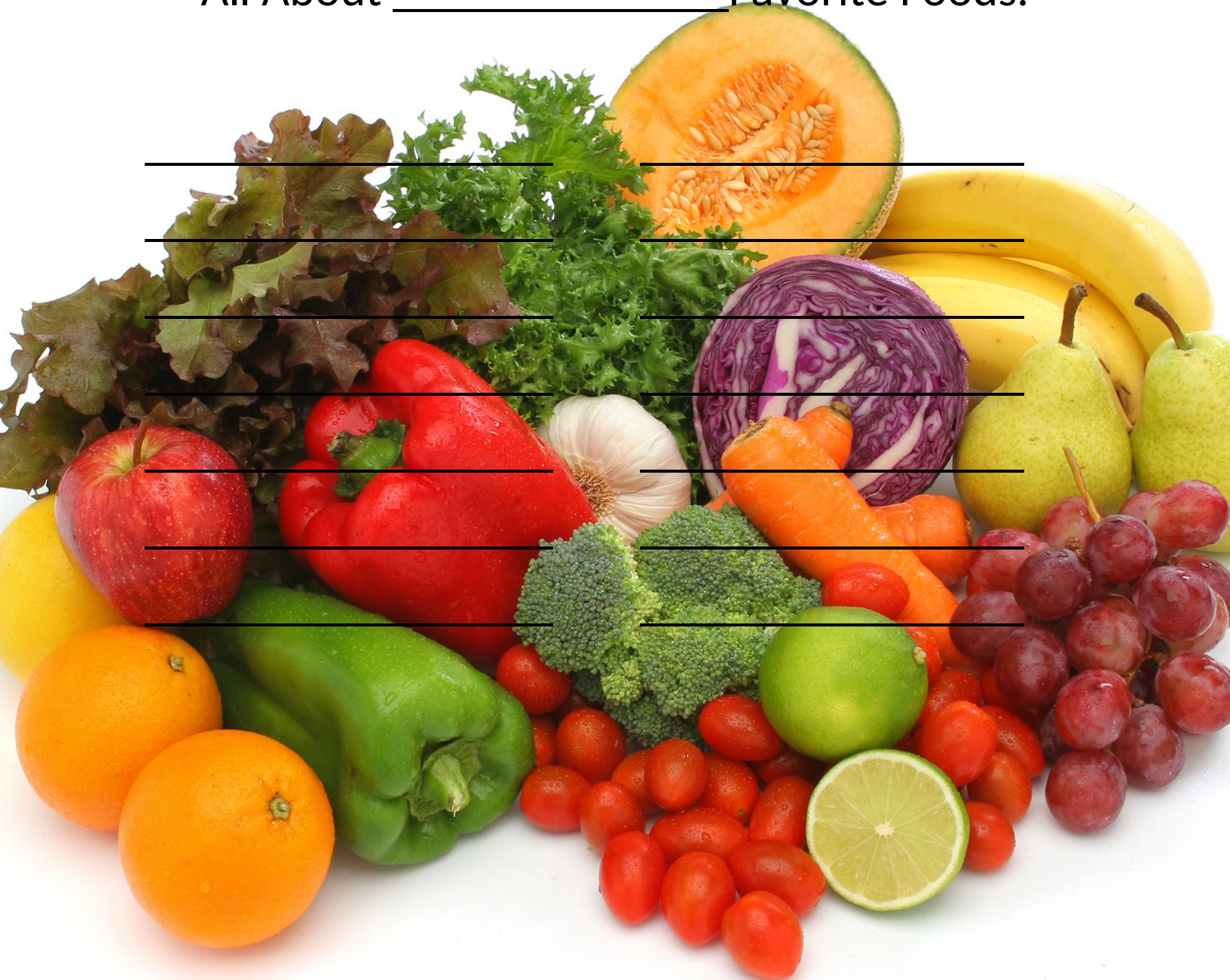
This information is intended for use by the Creative Director, developed in cooperation with the parents. THIS IS NOT INTENDED TO BE A LEGALLY BINDING CONTRACT.

**Signatures:**

**Parent/Guardian:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Educator:** \_\_\_\_\_ **Date:** \_\_\_\_\_

All About \_\_\_\_\_ Favorite Foods.



# All About \_\_\_\_\_'s Family

**Child's Name** \_\_\_\_\_ **Birthdate:** \_\_\_\_\_

**Child's Name** \_\_\_\_\_ **Birthdate:** \_\_\_\_\_

**Parents:** \_\_\_\_\_ **Home Phone:** \_\_\_\_\_ **Work Phone:** \_\_\_\_\_

**Address:** \_\_\_\_\_

The information requested is intended for use by program to coordinate volunteer efforts, and plan activities that meet the needs of our center, children, and families.

<b>PARENTS' OCCUPATIONS</b>
<b>PARENT'S HOBBIES, INTERESTS, SKILLS OR TALENTS</b>
<b>ORGANIZATIONS PARENTS INVOLVED WITH</b>
<b>FAMILY PAST/PRESENT INVOLVEMENT WITH EARLY CHILDHOOD</b>

I AM INTERESTED IN THE FOLLOWING ACTIVITIES:

- Weekend holiday events       Weekend family outings (amusement, park, zoo, etc.)  
 Parenting information workshops       Parent book club       Cooking club/Let's Dish  
 Fathers' night out       Mothers' night out       Visiting with senior citizens  
Other:

I AM NOT INTERESTED IN THE FOLLOWING ACTIVITIES:

- Weekend holiday events       Weekend family outings (amusement, park, zoo, etc.)  
 Parenting information workshops       Parent book club       Cooking club/Let's Dish  
 Fathers' night out       Mothers' night out       Visiting with senior citizens

I CAN HELP BY:

- Planning activities       Planning fundraising efforts       Assisting w/website maintenance  
 Taking photos/videos       Making phone calls       Helping in the classroom

Other:

ANYTHING ELSE?

Person Completing Form: \_\_\_\_\_ Date: \_\_\_\_\_

# THE CHILDREN'S COLLEGE PROFESSIONAL CHILDCARE

Release for Publication

The Children's College professional childcare services takes pictures, video and/or audio of the children who are enrolled in the program on a daily basis. These reproductions may be used in print or electronic media- educational materials, fundraising, anecdotal, classwork, social media, marketing and other forms of publicity.

Please indicate your desire concerning your child appearing in any of these pictures and/videos.

Please initial:

\_\_\_\_\_ I give the Children's College the right and permission to publish any photographs and/or videos made of my child/ren.

\_\_\_\_\_ I do not give permission for my child to be photographed.

Child's  
Name: \_\_\_\_\_

Birthdate: \_\_\_\_\_

Date: \_\_\_\_\_

Parent/Guardian Signature \_\_\_\_\_

