

Getting to know your school age child.....

Please take a moment to fill out this questionnaire so that we can know more about your child, we can better serve them in their before and after school care and make them feel like they're right at home!

- 1) What is your child's name and, or nickname? _____
- 2) When is your child's birthday? _____
- 3) What grade is your child presently in? _____
- 4) Do you prefer your child do their homework at the center or at home with you?

- 5) What is their favorite snack? _____
- 6) Is there anything they're especially afraid of? _____
- 7) What upsets your child? _____
- 8) What excites your child? _____
- 9) Does your child play any sports or do any extracurricular activities?

- 10) Is there anything else that you feel is important for us to know about your child in order to better serve your family?

- 11) What School does your child attend? Independence Elementary _____
Hopewell Elementary _____

12) ALLERGIES? _____

Thank you so much for taking the time answering all of our questions so that we can better serve your family's needs. If at any time you have anything to add to this please don't hesitate to contact us!

Meeting Date: _____

Parent Signature: _____