



## Little Blessings Child Info Sheet

**Welcome to Little Blessings!**

Please take a moment to tell us about your child.

Parent/Volunteer's Name: \_\_\_\_\_

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

Age: \_\_\_\_\_ Allergies: \_\_\_\_\_

Special Instructions: \_\_\_\_\_

Level of Potty Training: \_\_\_\_\_



## Little Blessings Child Info Sheet

**Welcome to Little Blessings!**

Please take a moment to tell us about your child.

Parent/Volunteer's Name: \_\_\_\_\_

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

Age: \_\_\_\_\_ Allergies: \_\_\_\_\_

Special Instructions: \_\_\_\_\_

Level of Potty Training: \_\_\_\_\_