

PHOTO RELEASE/ EMERGENCY/ INFO CARD

Childs Name _____ Date of Birth _____

Address _____ Town _____

Zip _____ Phone _____ Cell Phone _____

Father _____ Employer _____ Phone _____

Mother _____ Employer _____ Phone _____

Marital Status of Parents _____ Step Parent(s) Name _____

Siblings(names) _____

****I Do /// I Do Not** give permission to release my home phone number to create a “friendship” list to be distributed to the other parents for play dates, party invites etc. **Use this Phone #:** _____

Preschool Photo Release Form

****I Do /// I Do Not** give my permission For Teachers Pets Preschool to use images of my child :

(Childs Name) _____

Taken at school or school-related events, in any Teachers Pets Preschool publications and promotional materials. These may include use in print materials, presentations, and on the Preschool Web Site (Teachers Pets Preschool.com) and Facebook page.

Signature of Parent or Guardian

Date: _____

So we may learn a little more about your child, Please answer the following questions:

Has your child previously attended Preschool? _____

Does Your child use the bathroom independently? _____

What Holidays does your family celebrate? _____

Does your child have any special fears? _____

Does your child require any special care? Explain _____

Does your child have any Allergies? _____

Does your child have a History of Physical impairment? _____ Visual _____ Speech _____

Explain _____

Does your child receive any special services? _____