



ALL ABOUT ME

We believe it's important to know as much as we can about your child before or while he / she transitions to our care.

Please fill in this form and return it to us!

CHILD NAME: _____ **DOB:** _____

What days does your child require Afterschool Care?

Monday

Tuesday

Wednesday

Thursday

Friday

1. Does your child have any brothers or sisters? (Please indicate their names/ages)

2. What class is your child in and the name of his/her current teacher?

3. Do you have any household pets? If so, tell us their names!

4. What languages are spoken at home?

5. Has your child attended an afterschool club before?

6. Does your child have any dietary needs?

7. Has your child any allergies?



8. Is there a particular activity your child enjoys most?

9. Do you feel your child needs help completing his/her homework, is there an area of homework they find difficult?

10. We dedicate 40 minutes to homework; please specify which subject you are happy to leave for home should your child not have enough time?

11. Do you or your child's teachers have any concerns or worries about your child's development?

12. Would you consider your child to be a flight risk? Do they often wander off

Thank you!