

Wee Blessings Intake Information Sheet

1. **Child's Name** _____ **Gender:** _____
(last) (first) (middle)

2. Family History:

Parents Marital Status: married ___ single ___ divorced ___ separated ___

Other children in the home: (name and age please)

1) _____ 2) _____ 3) _____
4) _____ 5) _____

3. Play and Sociability:

How does he/she get along with other children? _____

Are his/her playmates girls? ___ boys? ___ younger? ___ older? ___ same age? ___

What is the usual size of his/her play group? _____ How often? _____

Previous play experience: preschool _____ play group _____ Sunday School _____
daycare _____ story hour at the library _____

What are your child's favorite activities? _____

4. Personal and Emotional Development:

Does he/she accept new people easily? _____

Does your child have any fears? If so, what are they? _____

How does your child respond to discipline? _____

Is he/she right or left handed? _____

Any speech difficulties or nervous habits? If so please describe. _____

Does your child have any **allergies** to food? _____
plants? _____ animals? _____ other? _____

5. Please give any other information which you believe will be helpful to us in understanding your child.
(In case of a disability, please describe.) _____

6. If your child is 4 years old, which school will he/she attend next year? _____

7. What is the most important thing you hope for your child to gain from attending preschool this year?

8. Financial Responsibility:

I agree to be financially responsible for the year's tuition.

Parent/Guardian signature _____ **date** _____

9. Field Trip Agreement:

I give permission to Wee Blessings staff to take my child on field trips or walks outside the building. I understand that parent volunteers will be asked to go along.

Parent/Guardian signature _____ date _____

10. Pick-Up Permission:

I hereby give permission for my child to leave the preschool with the following persons named below. It is the responsibility of the parents/guardians to notify the preschool, in writing, of any changes.

Please indicate your normal routine for pick-up below.

NAME	PHONE	RELATIONSHIP	DAY OF THE WEEK (Circle)
_____	_____	_____	M/ T/ W/ Th/ F
_____	_____	_____	M/ T/ W/ Th/ F
_____	_____	_____	M/ T/ W/ Th/ F

Other People Who Might Pick-Up:

NAME	PHONE	RELATIONSHIP
_____	_____	_____
_____	_____	_____

If there is a separation or divorce custody problem of which we should be aware, please explain:

Parent/Guardian signature _____ date _____

11. Blizzard Lodging:

In case of a blizzard, the Wee Blessings Preschool will be canceled. If a blizzard occurs during a class session and the weather is so severe that the children cannot be picked up, lodging arrangements should be made with a family in Orange City. Please fill out one of the following:

*(child's name) _____ lives in Orange City so no further arrangements are needed.

*(child's name) _____ lives outside of Orange City and we have made arrangements with the following family for lodging in case of a blizzard.

Name _____

Address _____

Phone _____

Relationship to child _____ (grandparent, relative, friend, etc.)

Parent/Guardian signature _____ date _____

12. Statement of Agreement:

We, the undersigned, have read the Parent Handbook and agree with the policies and rules governing Wee Blessings Preschool and understand we may request a complete copy of the detailed policies if desired.

Parent/Guardian signature _____ date _____

Parent/Guardian signature _____ date _____