



Preschool & Pre-Kindergarten Registration Form

Child's name _____ Date of birth _____

Help us to better know your child and your needs:

Please describe your child's personality: _____

What are your child's favorite activities, books, toys, t.v. shows, etc.?

Please describe a typical day for your child: _____

When does your child usually eat: breakfast _____, lunch _____, and dinner _____

What food does your child like and dislike? _____

Please list any known allergies/food restrictions: _____

Is your child an independent eater? _____

How long does your child nap? _____ When? _____

What routines do you use at nap/bedtime? _____

Siblings:

Name _____ Age _____

Living in child's home? _____

Name _____ Age _____

Living in child's home? _____

Others living in child's home:

Name _____ Relationship to child: _____

Name _____ Relationship to child: _____

Persons special to your child:

Name _____ Relationship to child: _____

Name _____ Relationship to child: _____

Name _____ Relationship to child: _____

Name _____ Relationship to child: _____

Pets:

Name _____ Describe: _____

Name _____ Describe: _____

What languages are spoken at home? _____

How does your child react to illness? _____

Does your child experience any chronic illnesses? _____

Is your child on long/short term medications? _____

What best describes your child's toileting abilities?

Occasional accidents _____ Wearing underwear _____ Toilets self successfully _____

What words do you use for: urination? _____ /bowel movement? _____

What discipline techniques have you found to be successful? _____

Do you have any concerns regarding your child's emotional or physical development?

Are there any changes in your child's life of which we should be aware? _____

How does your child react to separating from you? _____

How can we support you at drop off? _____

Please describe any previous childcare situations. _____

Is there anything else we should know to better meet your needs? _____

What do you expect from Cornerstone Children's Center? _____

Signature

Date