

Child Information Sheet

Help us get to know your child. Please provide the following information to help us get to know your child better:

Child's Name: _____

Date of Birth: _____

Parents' Names: Mother: _____

Father: _____

Brothers: _____

Sisters: _____

Pets: _____

Names for grandparents: _____

Allergies: _____

Favorite toy: _____

Favorite food: _____

Favorite book: _____

Adult authorized to pick up child: _____

Thank you.
Your child's Sunday School Teachers

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