Intake Form

Ch	ild's name: D.O.B
1)	What can you tell us about your child that will help make the transition into Peace Lutheran Preschool as smooth as possible?
2)	Does your child have any allergies, medical conditions, fears or behaviors we should be aware of?
3)	Tell us about your family. Are there siblings in the home? If so, what are their Names and ages? Grandparents who are involved in your daily lives? Pets?
4)	Does your child have special interests or hobbies?
5)	What are you looking for from Peace Lutheran Preschool in order to make preschool a great experience for your child and family?